FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name P92000003338 (0)

CONNOISSEUR HOMES OF FLORIDA, INC.

Principal Place of Business

Mailing Address

5260 W BRONSON HWY

5280 W BRONSON HWY

FILED May 22 1996 8:00 am Secretary of State



STE 120 KISSIMMEE	FL 34746		STE 130 Kissimmee Fl 34748			Date Incorporated or Qualified 11/04/1992		of Last Report	
2. Principal Pla	ace of Business	2a. Mailing Add	dress		******************	4. FEI Number	-L	Applied For	
21		26				59-3150191		Not Applicable	
Suite, Apt. / 22	suite #119	Suite, Apt.	#, etc.			5. Certificate of Status Desired	X	\$8.75 Additional Fee Required	
City & State		City & State	е			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Žip	Country	Zip		Country		8. This corporation has liability for i	intangible ta	x under s. 199.032,	
24	25	[29]	30	r		Florida Statutes Yes	7.		
	9. Name and Address of Curren	t Hegistered Agen	t	81	Name	10. Name and Address of New R	égistered /	\gent	
				101	Name				
HAYES, ROBERT S				82	Street Ad	at Address (P.O. Box Number is Not Acceptable)			
	VINE ST			83					
KISSIM	IMEE FL 34741			03					
				84	City			85 Zip Code	
11 Purcuant to	o the provisions of Sections 607 0502	and 607 1500 Flori	do Ctotidae, the	00000		oration submits this statement for the pur	FL	11	
OF FEGISION	ed agent, or both, in the State of Florid th, and eccept the obligations of, Secti	ia. Suco change wa	s authori zaci hvit	the corp	oration's bo	oration submits this statement for the pur lard of directors. Thereby accept the appo	pose of cha pintrnent as	nging its registered office registered agent. I am	
SIGNATURE									
12.	Signature, typed or priced name of registered agent	***			t signature recei	ired when reinstating)	CATE		
TITLE	OFFICERS ANI	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI			
NAME	VD Greene, Graham D	L.J Dt		1. 1 TITLE			•	Change	
STREET ADORESS	5260 W BRONSON HWY #	11a		1.2 NAME		5260 W. Bronson Hi	my #//	9	
GITY-ST-ZIP	KISSIMMEE FL 34746	120 III /		1.3 STREET		3000 10 1000	1	•	
TITLE	VD			1.4 CITY - S 2. 1 TITLE	1-7IP			Addition	
NAME	CHRISTNER, RUSSELL	Λ.		2.2 NAME			7	Addition	
STREET ADDRESS	5260 W BRONSON HWY #	ler 119			ADDRESS E	SALO IN BROWSON	H wink	419-	
CITY-ST-ZIP	KISSIMMEE FL 34746	120 111 (2.3 STREET 2.4 CITY-S	") albumates to tour a con-	- 1	(1)	
TITLE	DN	[] DE		3. 1 THLE		PD ~ U		Change X Addition	
NAME	Line Docek			3.2 NAME		Welling Derek	الله الم	J charge Andalion	
STREET ADDRESS	Melling Devel	2 NWY.#119		3.3. STREET	ADDRESS	Welling Derek 5260 B. Bronson Nu	14 #11	9	
DitY-ST-ZIP	Wetling Derek 52 60 W. Bronson Kissimmer, FZ 34	246		3.4 CITY-S	1. 7IP	Kissimmer, PC 34	าน/	•	
TITLE				4. 1 TITLE	·	- 331 min Cy C 01	<u> </u>	Change Addition	
NAME				1.2 NAME	İ		h		
STREET ADDRESS				1.3 STREE I	ADDRESS			•	
CITY - ST - ZIP				I.4 CITY - S	ŧ				
TITLE		Dt		5. 1 TITLE		30000183	16DE	Charge Addition	
NAME				5.2 NAME	1	30000185 -05/23/96010	1200	1 161	
STREET ADDRESS				5.3 STREET	ADDRESS	***935.00		CIZUXD.	
CITY-ST-7IP		P		5.4 CITY- S	1-21P			31 - 1/JV)	
TITLE		☐ DE	LETE (S. 1 TITL€			C	Change [] Addition	
NAME			ŧ	2 NAME					
STREET ADDRESS			: 6	3 STREET	ADDRESS				
CITY-ST-ZIF			Ĭ .	34 CHY-S	I-ZIP				

14. Ido hereby certify that the information supplied with this filing is voluntarity furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receipt of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath, that I am an officer or director of the corporation or the receipappears in Block 12 or Block 13 if changed, or on an attachment

5/14/96 407-396-8522