## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000007639 (6) DOCUMENT #

**BADGER HOMES INCORPORATED** 

## **FILED** Apr 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 11147 HEARTWOOD PL 11147 HEARTWOOD PL WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/27/1993 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 21 26 65-0485754 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHASE, DANIEL A 81 Name 11147 HEARTWOOD PL 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33414 83 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition CHASE, DANIEL A NAME 1.2 NAME 11147 HEARWOOD PL. STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY - ST - ZIP 1.4 CITY-ST-ZIP ☐ DELETE TITLE 21 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

In g does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information of poor is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address. 14. I hereby certify that the information sub-indicated on this annual report or suppli al annu officer or director of the corporation or the Block 12 or Block 13 if changed, or on

SIGNATURE: