

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

FILED

Jul 06 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000018184 1. Corporation Name ✓ Dunmill Homes, Inc.					

Principal Place of Business 1754 Dockway North Fort Myers, FL 33903		Mailing Address 4 Aspenwood Place Guelph, Ontario N1K 1P3 Canada	
---	--	--	--

05/24/99 90027 047 150.00
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	46 Hyland Road
22 City & State		27 City & State	
23	Zip	28	Guelph, Ontario
24	Country	29	N1E 1T3
25		30	Canada

3. Date Incorporated or Qualified	
03/10/93	
4. FEI Number	Applied For
65-0393581	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax.	
☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	
Garey F. Butler Humphrey & Knott, P.A. 1625 Hendry Street, Suite 301 Fort Myers, FL 33901 US	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	John Dunnink
STREET ADDRESS	1754 Dockway
CITY-STATE-ZIP	North Fort Myers, FL 33903
TITLE	☐ DELETE
NAME	Lee J. Dunnink
STREET ADDRESS	1754 Dockway
CITY-STATE-ZIP	North Fort Myers, FL 33903
TITLE	☐ DELETE
NAME	Todd M. Dunnink
STREET ADDRESS	1754 Dockway
CITY-STATE-ZIP	North Fort Myers, FL 33903
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ May 17/99

6/4