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

PROFIT CORPORATION **ANNUAL REPORT**

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000021711 (5) DOCUMENT #

WEST CUSTOM HOMES, INC.

Principal Place of Business Mailing Address									86118 11881	/(WIE 1884) 1	1881 ISBS 18861	
2858 REMINGTON GREEN			2858 REMINGTON GREEN									
103			103					DO NOT WRITE IN	J THIS SI	PACE		
TALLAHASSEE FL 32308			TALLAHASSEE FL 32308 US					3. Date Incorporated or Qualified				
"								03/23/1993				
2. Principal P	lace of Business	26	. Mailing Address					4. FEI Number		I	pplied For	
21			26					59-3171092		ļ <u>-</u>	lot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.							\$8.75	Additional	
22			27					8. Certificate of Status Desired		Fee R	lequired	
City & State			City & State					6. Election Campaign Financing			May Be	
23			28								to Fees	
Zip	Coun	· -	¬ — —			Country		8. This corporation owes or has paid	-		langible No	
24	25 29 30 9. Name and Address of Current Registered Agent							Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
WEST, WILLIAM J						N.	ame	10. Hambaria Radiosa di Hamiltogra	70100 11	<u> </u>		
	58 REMINGTON GRI	FFN				ļ						
#103					82	St	reet Addres	ss (P.O. Box Number is Not Acceptable)	ı			
TALLAHASSEE FL 32308					83							
•										11	0-1-	
•					84	Ci	ity		FL	85 Zip	Code	
office or r agent. I a SIGNATURE	egistered agent, or bo m familier with, and ec	th, in the State of Flor cept the obligations o	ida Such change was a of, Section 607.0505, Fk	authorized orida Stat	d by utes	y the s.	corporation	ration submits this statement for the pur n's board of directors. I hereby accept t	he appoi	hanging i ntment as	its registered s registered	
<u> </u>	Signature, typed or pricted nar	ne of registered agent and bit DEFICERS AND DIFF			d Age	មាវ ខេត្ត	Inalitie required		DATE:			
12.	<u> </u>	JEFICENS AND DIFF	DELETE	13. 1.1 Hi	11.5		<u></u>	ADDITIONS/CHANGES TO OFFICER		Change	Addition	
NAME	WEST, WILLIAM	J				1.2 NAME			L	_r onange	Addition	
STREET ADDRESS	2858 REMINGTO					1.3 STREET ADDRESS						
CATY-ST-ZIP	TALLAHASSEE F		1.4 CI									
TITLE	DELETE 2.11					71-211			[Change	Addition	
NAME				2.2 NA	ME					_ •	-	
STREET ADDRESS				2.3 ST	REET	ADDE	RESS .					
CITY-ST-ZIP				2. 4 CI	ITY-S	ST-ZII	P					
TITLE	-		DELETE	3.1 111	ſĻΕ					Change	Addition	
NAME				3.2 NA	ME						j	
STREET ADDRESS			•	3.3 ST	REET	ADDF	RESS					
CITY-ST-ZIP			- Lander	3.4. CI		ST - ZIF	>		····	-		
TITLE			☐ DELETE	4 1 TIT					L	_] Change	Addition	
NAME				4 2 N/								
STREET ADDRESS				4 3 ST								
CITY-ST-ZIP			DELET E	4.4 CfT		T - ZIP	·			Change	Addition	
TITLE			TT DETEIR	5170					L	_ ∪nange	☐ Addition	
NAME				5 2 NA	WIŁ		1				OK!	

14. Thereby 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 supply quental annual report (Sque 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 occiver or trustee dynamics of the 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 attrictment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 C(1Y - S1 - Z(P

6.1 TITLE

6.2 NAME

DELETE

218

Addition

Change

300002433743

-02/18/98--01027--001

***300.00

FILED

Feb 18 1998 8:00am

Secretary of State

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