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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000032170 (1)

1. Corporation Name

PRESTIGE HOMES CONSTRUCTION AND DEVELOPERS THE V
INYL KING, INC.

Principal Place of Business

Mailing Address

5310 US HWY. 41N.
84
PALMETTO FL 34221
US

5310 US HWY. 41 N.
84
PALMETTO FL 34221-2000
US

2. Principal Place of Business

2a. Mailing Address

21 5310 US HWY 41 N
Suite, Apt. #, etc.

26 5310 US HWY 41 N.
Suite, Apt. #, etc.

22 84

27 84

City & State

City & State

23 PALMETTO FL

28 PALMETTO FL

24 34221

25 USA

29 34221

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
04/29/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0413729

Applied For
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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

NOLAN, WILLIAM T
3626 HIGHWAY 301 NORTH
ELLENTON FL 34222

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME NOLAN, WILLIAM T
STREET ADDRESS 3626 HIGHWAY 301
CITY- ST- ZIP ELLENTON FL 34222

TITLE VP
NAME MOWAT, GREG
STREET ADDRESS 3626 HWY. 301
CITY- ST- ZIP ELLENTON FL

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GREG MOWAT V.P.

4-20-97

941-723-1158

CR2E034 (9/96)