FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT

1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000041169 (2)

FIRST HOME BUILDERS, INC.

FILED Mar 18 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				I LEDVINGET THE EQUAL THAN BONN DOUNT BOLLY BOOK OF THE WASH WASH BUNG CONTROL
5827 CORPOR		5827 CORPORATION CIR.		
FT. MYERS FL 33905		FT.MYERS FL 33905 US		DO NOT WRITE IN THIS SPACE
••		US		3. Date Incorporated or Qualified
				06/07/1993
		2a. Mailing Address		4. FEI Number Applied For
21 1820 Colonial Blvd.		26 1820 Colonial Blvd.		
Suite, Apt. #, etc.		Suite, Apt. #, otc.		5. Certificate of Status Desired S8.75 Additional
City & State		27 Ste. 101 City & State		Fee Required
23 Fort Myers, FL		28 Fort Myers, FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	a. This corporation owes or has paid the current year Intangible
24 33907	25 USA		30 USA	Personal Property Tax due June 30. Yes X No
g, Name and Address of Current Registered Agent AACCADD, IAAACC NA 81 Name				10, Name and Address of New Registered Agent
MODUM, JAMES M				
19600 NALLE RD N FT MYERS FL 33919				Logue, Patrick Address (P.O. Box Number is Not Acceptable)
ן מי	1 MTERS PL 33919		83	B11 PGA Drive
			· ·	·
) /	84 City	Fort Myers FL 85 Zip Code 33917
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's office or registered agent, or both, in the diate of borida Such change was authorized by the corporation's boar agent. I am familiar with, and account the obligations of Section 607.0505, Florida Statutes.				Fort Myers L
office or re	egistered agent, or both, in the State	of torida Such change was au	thorized by the cor	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		1110/10 07. 000111011	ida Siaidies.	3\10\06
			Registered Agent signatur	e required when reinstaling) DATE
12.	OFFICERS AN	DEFIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	Z) DELETE	1.1 TITLE	PVD XJ Change Addition
NAME	MCCORD, JAMES M		1.2 NAME	Logue, Patrick
STREET ADDRESS	19800 NALLE RD N FT MYERS FL		1.3 STREET ADDRESS	6311 PGA Drive
CITY-ST-ZIP TITLE	V TI MIERO FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	N. Fort Myers, FL 33917
NAME	LOGUE, PATRICK)A billi	2.1 MILE 2.2 NAME	☐ Change ☐ Addition
STREET ADDRESS	6311 PGA DRIVE		2.3 STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •
CITY-ST-ZIP	N. FT. MYERS FL 33917		2.4 CITY - ST - ZIP	
TITLE	11. 11	DELETE	3.1 TITLE	Change Addition
NAME		_	3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			52 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	
NAME .		☐ DETEIF	6.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS			6.2 NAME	`
CITY-ST-ZIP			6.3 STREET ADDRESS	
	ertify that the information supplied w	th this filing does not qualify for	6.4 CiTY-ST-ZIP	ed in Section 119.07(3)(i). Florida Statutes, I further certify that the information

indicated on this annual report or supplemental arguet 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: