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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000041850 (7)

1. Corporation Name SIGNATURE HOMES & INVESTMENTS INCORPORATED Principal Place of Business Mailing Address 3338 BRIARWOOD CIRCLE 3338 BRIARWOOD CIRCLE SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1993 05/01/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-3191766 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zφ Zip Yes No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name **BALLENTINE, TERRY** Street Address (P.O. Box Number is Not Acceptable) 82 3338 BIRARWOOD CIRCLE 83 SAFETY HARBOR FL 34695 Zip Code City 85 84 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) ĎĄŤĚ Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 2 DELETE Addition ☐ Change 1, 1 TITLE TITLE CR2E034 **BALLENTINE. TERRY** 1.2 NAME NAME 3338 BRIARWOOD CIR 1.3 STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL 34695 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.13IILE TITLE BALLENTINE, JOSEPH 2.2 NAME NAME 3338 BRIARWOOD CIR 2 3 STREET ADDRESS STREET ADDRESS SAFETY HARBOR FL 34695 2.4 CITY - ST- ZIP CITY-ST-ZIP Addition DELETE Change 3 1 TITLE TITLE NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition [] DELETE 4. 1 TITLE TITLE **4.2 NAME** NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE [] Change ☐ Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 7IP DITY-ST-ZIP Change Addition

6 1 TITLE

6.2 NAME 6.3 STREET ADDRESS

64 CiTY-ST-ZIP

SIGNATURE

14. I do hereby certify that the information supplicantly that the information indicated on this cath; that I am an office or director of the appears in Block 12 or Block 13 in charts.

TITLE

NAME

STREET ADDRESS

CITY-ST-2IP

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

n an attachment with an address.

in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further a full report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under portation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name of an attachment with an address.

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