

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 27, 1999 8:00 am  
Secretary of State

04-27-1999 90122 050 \*\*\*150.00

DOCUMENT # P93000046774

1. Corporation Name

DONALDSON HOMES CORPORATION

Principal Place of Business

577 SOUTH DUNCAN AVENUE  
CLEARWATER, FL 33756  
US

Mailing Address

13663 65TH ST  
877 EXECUTIVE CENTER DR WEST  
LARGO FL 33771  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/02/1993

4. FEI Number

59-3189366

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 1721 RAINBOW DR

Suite, Apt. #, etc.

22 City & State

23 CLEARWATER FL

Zip

Country

24 33755

25 PINELLAS

2a. Mailing Address

26 1721 RAINBOW DR.

Suite, Apt. #, etc.

27 City & State

28 CLEARWATER FL

Zip

Country

29 33755

30 PINELLAS

9. Name and Address of Current Registered Agent

AGER, S A  
13663 65TH ST  
LARGO FL 33771

10. Name and Address of New Registered Agent

81 Name

J. MARCUS VERNON, Esq.

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

83

1721 RAINBOW DRIVE

84 City

CLEARWATER

FL

85 Zip Code

33755

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 X

Signature, typed or printed name of registered agent and title if applicable.

(NOT E: Registered Agent signature required when reinstating)

DATE

J. MARCUS VERNON

4/20/99

12. OFFICERS AND DIRECTORS

TITLE VPT  
NAME AGER, SIMON  
STREET ADDRESS 2323 BELLAIR RD  
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE P  
NAME AGER, COLIN  
STREET ADDRESS 2323 BELLAIR RD  
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE VPS  
NAME PETERS, MCKAY  
STREET ADDRESS 2323 BELLAIR RD  
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99

727-447-4444

Daytime Phone #

CR2E034 (11/98)