

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JACKIE B. MATHIAS
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

53 MAY -1 AM 8:33

DOCUMENT # P93000056272 (6)

FLORIDA HOUSING CONCEPTS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 8202 REGENTS CT
UNIVERSITY PARK FL 34201
Mailing Address: 8202 REGENTS CT
UNIVERSITY PARK FL 34201

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21
2a. Mailing Address: 26
3. Date Prepared or Qualified: 08/11/1993
3a. Date of Last Report: 03/07/1994
4. FEI Number: 65-0465294
5. Certificate of Status Desired: ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 197.032, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent: WALKER, JR. P
8202 REGENTS COURT
UNIVERSITY PARK FL 34201

10. Name and Address of New Registered Agent: 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 607.05 and 607.1509, 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 the former office. Florida Statutes.

SIGNATURE: *Paul Walker Jr.* (P. Walker Jr.) 4/10/95

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. NAME	DP	1.1 TITLE	1.1 NAME	☐ Change	☐ Addition
2. STREET ADDRESS	WALKER, PAUL R JR.	2.1 NAME	2.1 NAME	☐ Change	☐ Addition
3. CITY, ST, ZIP	8202 REGENTS COURT	3.1 STREET ADDRESS	3.1 STREET ADDRESS	☐ Change	☐ Addition
4. NAME	UNIVERSITY PARK FL	4.1 CITY, ST, ZIP	4.1 CITY, ST, ZIP	☐ Change	☐ Addition
5. NAME		5.1 TITLE	5.1 NAME	☐ Change	☐ Addition
6. STREET ADDRESS		6.1 NAME	6.1 NAME	☐ Change	☐ Addition
7. CITY, ST, ZIP		7.1 STREET ADDRESS	7.1 STREET ADDRESS	☐ Change	☐ Addition
8. NAME		8.1 CITY, ST, ZIP	8.1 CITY, ST, ZIP	☐ Change	☐ Addition
9. NAME		9.1 TITLE	9.1 NAME	☐ Change	☐ Addition
10. STREET ADDRESS		10.1 NAME	10.1 NAME	☐ Change	☐ Addition
11. CITY, ST, ZIP		11. STREET ADDRESS	11. STREET ADDRESS	☐ Change	☐ Addition
12. NAME		12.1 CITY, ST, ZIP	12.1 CITY, ST, ZIP	☐ Change	☐ Addition
13. NAME		13.1 TITLE	13.1 NAME	☐ Change	☐ Addition
14. STREET ADDRESS		14.1 NAME	14.1 NAME	☐ Change	☐ Addition
15. CITY, ST, ZIP		15. STREET ADDRESS	15. STREET ADDRESS	☐ Change	☐ Addition
16. NAME		16.1 CITY, ST, ZIP	16.1 CITY, ST, ZIP	☐ Change	☐ Addition
17. NAME		17.1 TITLE	17.1 NAME	☐ Change	☐ Addition
18. STREET ADDRESS		18.1 NAME	18.1 NAME	☐ Change	☐ Addition
19. CITY, ST, ZIP		19. STREET ADDRESS	19. STREET ADDRESS	☐ Change	☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 197.03(2)(b), 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 registered business 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: *Paul Walker Jr.* P (Pres.) 4/10/95 813 351-3037