

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

**CORPORATION
ANNUAL REPORT
1995**



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

RECEIVED
DIVISION OF CORPORATIONS
SEP 14 1995

DOCUMENT # P93000061653 (0)

1. Corporation Name:

CENTRAL FLORIDA BUILDERS OF BREVARD, INC.

Principal Place of Business:

**101 HARRIS BLVD.
INDIALANTIC FL 32903**

Principal Address:

**101 HARRIS BLVD.
INDIALANTIC FL 32903**

DO NOT WRITE IN THIS SPACE

3. Date Report is Due (Required)	3a. Date of Last Report
09/02/1993	03/08/1994
4. FID Number	Applied For Not Applicable
59-3199475	
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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
25	30
	USA

9. Name and Address of Current Registered Agent

**PARKER, JEFF
101 HARRIS BLVD
INDIALANTIC FL 32903**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of the present and past Acts of the Florida Legislature, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, within the State of Florida. Such action 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 607.02(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of Corporation)

(Signature of Registered Agent or Secretary of Corporation)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	D	1. TITLE	☐ Change ☐ Addition
2. NAME	PARKER, JEFF	2. NAME	
3. STREET ADDRESS	101 HARRIS BLVD.	3. STREET ADDRESS	
4. CITY, ST, ZIP	INDIALANTIC FL 32903	4. CITY, ST, ZIP	
5. TITLE		5. TITLE	☐ Change ☐ Addition
6. NAME		6. NAME	
7. STREET ADDRESS		7. STREET ADDRESS	
8. CITY, ST, ZIP		8. CITY, ST, ZIP	
9. TITLE		9. TITLE	☐ Change ☐ Addition
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, ST, ZIP		12. CITY, ST, ZIP	
13. TITLE		13. TITLE	☐ Change ☐ Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY, ST, ZIP		16. CITY, ST, ZIP	
17. TITLE		17. TITLE	☐ Change ☐ Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption states for Section 199.03(2)(b), Florida Statutes. I further certify that this information is filed on this annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. This filing is effective for the corporation or the officer or director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Jeff Parker **JEFF PARKER**

(Signature and Typed or Printed Name of Mailing Officer or Director)

2-10-95

407-779-2231