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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 24 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000065702 (1)

ST. CLAIR CUSTOM HOMES INC.

Principal Place of Business		Mailing Address	Mailing Address		I IODIIGEDI IID IBSDE IIIII DOIII DOIII BEIII BEIII	i Octobi Hilist indel decid elet indl
2441 VANCE TER PT CHARLOTTE PL 33981 US		2441 VANCE TER PT CHARLOTTE FL 33981 US				
				DO NOT WRITE IN THIS SPACE		
"		•			3. Date Incorporated or Qualified	
	- · · · · · · · · · · · · · · · · · · ·				09/16/1993	
	Place of Business	2a. Mailing Address			4. FEt Number	Applied For
		Suite, Apt. #, etc.	Suite Ant # etc		65-0438225	Not Applicable
22		27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Star	10	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country		Country		Trust Fund Contribution	Added to Fees
24	25 29		30	. This corporation owes or has paid the current year intangr		
	9. Name and Address of Curre		1001		10. Name and Address of New Register	
SIN	NCLAIR, RICHARD B		81	Name		
2441 VANCE TERRACE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
PORT CHARLOTTE FL 33981			83			
			63			
			84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Statut	les, the above	-named cor	rporation submits this statement for the purposation's board of directors. I hereby accept the	e of changing its registered
office or a agent. La	registered agent, or both, in the Stati am familiar with, and accept the oblic	3 of Florida, Such change was a attents of, Section 607,0505. FI	authorized by orida Statutes	the corpora s.	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE	•	,				
	Signature, typed or printed name of registered ag			ni signature requ	uired when reinstating) DAT	
12.	OFFICERS AN	IO DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	
NAME	SINCLAIR, RICHARD B		1.2 NAME			L Change L Addition
STREET ADDRESS	2441 VANCE TERRACE		1.3 STREET	ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL 33981		1.4 CITY-S	1		
TITLE			2.1 TITLE			Change Addition
NAME	BARROW, NANCY M 2.		2.2 NAME			
STREET ADDRESS	2441 VANCE TERRACE		2.3 STREET	ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL 33981		2 4 CITY-5	IT - ZIP		
TITLE	· ·		3.1 TITLE			☐ Change ☐ Addition
NAME	SUTTER, DONALD R	·	3.2 NAME			
STREET ADDRESS	24518 NOVA LANE		3.3 STREET			
CITY-ST-ZIP TITLE	PORT CHARLOTTE FL 33980	-2/ 09 DELETE	3.4. CITY - S	T-ZIP		
NAME		- Dittif	4.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.3 STREET			
TITLE		DELETE	5.1 TITLE	- LH		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	address		
CITY-ST-ZIP			5.4 CiTY-S1	- ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME	e _s		6.2 NAME			
STREET ADDRESS	•		6.3 STREET	ADDRECC		

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 attact/ment with an address.