

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000070846 (9)

1. Corporation Name

HOMETOWN BUILDERS, INC.



Principal Place of Business

3575 CANAVERAL GROVES BLVD.  
COCOA FL 32926

Mailing Address

3575 CANAVERAL GROVES BLVD.  
COCOA FL 32926

3. Date Incorporated or Qualified  
10/04/1993

3a. Date of Last Report  
04/24/1995

2. Principal Place of Business

21 4290 SAVANNAHS TRAIL

2a. Mailing Address

26 4290 SAVANNAHS TRAIL

4. FEI Number  
59-3207941

Applied For  
Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

23 MERRITT ISLAND, FL

Zip

24 32953

Country

25 BREVARD

24

City & State

28 MERRITT ISLAND, FL

Zip

29 32953

Country

30 BREVARD

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGE, KRIS M  
3575 CANAVERAL GROVES BLVD.  
COCOA FL 32926

81 Name

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

4290 SAVANNAHS TRAIL

83

84 City

MERRITT ISLAND

FL

85 Zip Code

32953

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

Kris Lange, Treasurer

2-26-96

Signature of officer or director of corporation or registered agent

Signature of Registered Agent (must be registered with corporation)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME LANGE, TERRY L  
STREET ADDRESS 5440 EDGEWATER CT  
CITY-ST-ZIP COCOA FL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE DT  
NAME LANGE, KRIS M  
STREET ADDRESS 5440 EDGEWATER CT  
CITY-ST-ZIP COCOA FL ☐ DELETE

1.2 NAME

TITLE DVPS  
NAME ADDIS, LAWRENCE S  
STREET ADDRESS 145 CORTEZ ST.  
CITY-ST-ZIP MELBOURNE BEACH FL ☐ DELETE

1.3 STREET ADDRESS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

1.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 stated in Section 119.07(3)(k), 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.

SIGNATURE:

Kris Lange

2-26-96 (407) 452-8099

Date

Daytime Phone #

CR2E034 (12/95)