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

**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P93000070846 (9)

HOMETOWN BUILDERS, INC.

Principal Place of Business Mailing Address 4290 SAVANNAHS TRAIL 4290 SAVANNAHS TRAIL MERRITT ISLAND FL 32953-8604 MERRITT ISLAND FL 32953

**FILED** Jan 22 1997 8:00am Secretary of State

|--|--|--|

			10/04/1993 Date incorporated or Qualified 3st. Date of Last Report 04/22/1996		eport			
2. Principal FI	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21 4095	SAVANNAHS TRAIL	. 26 4095 SAVI	ANNAHS	1R.	59-3207941	. No	ot Applicable	
Suite Apt.	#. eta	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 / Fee Re	Additional equired	
City & State 23 MER.R.		City & State # .	ISLANI	FL.	Election Campaign Financing Trust Fund Contribution	Provide the second	May Be to Fees	
Zip A A	Country	Zip 2022	Country	NA	8. This corporation has liability for in		. 199.032,	
24 329	$ SJ  _{25}  U.S.ft.$	29 32750	30 U.	S.A.		Yes No		
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Re	Jistered Agent		
	GE, KRIS M		81  1	Name				
			82					
MER	RITT ISLAND FL 32953			4045	SAVANNAHS TR.			
			83					
			84	City	4 1 1 1 mm	85 Zip	Cede A	
<b></b> _				MERY	RIH ISLAND	FL 32	953	
11. Pursuant I	to the provisions of Sections 607.0502 egistered agent, or both, in the State (	<sup>y</sup> and 607.1508, Florida Statu of Florida, Such change was	ites, the above-r authorized by th	iamed corp ne corporati	oration submits this statement for the pion's board of directors. I hereby accep	urpose of changing if of the appointment as	ts registered registered	
agent. La	m familiar with, and accept the obligat	tions of, Section 607.0505, F	lorida Statutes.			11100	7.5	
SIGNATURE		nex-		***************************************		14.77		
	Signatine ityrs order, wited name of regeleratinger		ITE: Registered Agent	signature require		DATE		
12.	OFFICERS AND	DELETE	13.	Т	ADDITIONS/CHANGES TO OFFIC	Change	Addition	
TITLE	LANGE, TERRY L	OLUCIE	1.1 TITLE			Citaliya	- vogition i	
NAME	5440 EDGEWATER CT		1.2 NAME			. <del> </del>	ļ	
STREET ADDRESS	COCOA FL		1.3 STREET AD				j	
C-TY - ST - ZIP		DEVETE	1.4 CITY-ST-	ZIP		Change	Addition	
THILE	DT LANCE KDIE M	DELETE	2.1 TITLE			m cianas	L. Addition	
NAME	LANGE, KRIS M		2.2 NAME					
STREET ADDRESS	5440 EDGEWATER CT		2.3 STREET AD					
COY-ST ZIP	COCOA FL	T beleve	2. 4 C(TY - ST-	ZIP			A station	
TITLE	DVPS	L DELETE	31 TITLE			Change	Addition	
NAME	ADDIS, LAWRENCE S		3 2 NAME					
STREET ADORESS	145 CORTEZ ST.		3.3 STREET AL					
CITY-S1-ZIP	MELBOURNE BEACH FL	T ones	3.4. C(TY - ST -	ZIP			Balaista.	
TITLE		☐ DELETE	4.1 TITLE	ŀ		☐ Change	Addition	
NAME			4. 2 NAME				İ	
STREET ADORESS			4.3 STREET AC					
CITY- ST-ZIP		- I nevere	4.4 CITY-ST-	ZIP		TT SE	A state to	
TITLE		DELETE .	5.1 TITLE			L Change	L Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET AC	DRESS				
CHTY-ST-ZIP			5.4 CITY - ST-	ZIP				
TITLE		L_ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME	] .				
STREET ACORESS			6.3 STREET AL	DDRESS				
CITY-S1-ZIP		1445 1   12	6.4 CITY - ST -	ZIP				

14. I do 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 chapged, or on an allachment with an address.

SIGNATURE:

1-14-97 407-453-8099