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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

Mailing Address

4095 SAVANNAHS TRAIL
MERRITT ISLAND FL 32953
US

4095 SAVANNAHS TRAIL
MERRITT ISLAND FL 32953
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1993

4. FEI Number

59-3207941

Applied For

Not Applicable

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1262 CURRY-DELL LN.

26 1262 CURRY-DELL LN

Suite, Apt. #, etc

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MERRITT ISLAND, FL.

28 MERRITT ISLAND, FL.

Zip

Country

Zip

Country

24 32952

25 BREVARD

29 32952

30 BREVARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGE, KRIS M
4095 SAVANNAHS TRAIL
MERRITT ISLAND FL 32953

81 Name

KRIS LANGE

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

1262 CURRY-DELL LN.

83

84 City

MERRITT ISLAND

FL

85 Zip Code

32952

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

1.1 TITLE D, P, S.
1.2 NAME LANGE, TERRY, L.
1.3 STREET ADDRESS 196 COUNTRY CLUB DR.
1.4 CITY-ST-ZIP MELBOURNE, FL. 32940 ☒ Change ☐ Addition

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

2.1 TITLE D, VP, T
2.2 NAME LANGE, KRIS, M.
2.3 STREET ADDRESS 196 COUNTRY CLUB DR.
2.4 CITY-ST-ZIP MELBOURNE, FL. 32940 ☒ Change ☐ Addition

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

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 attachment with an address.

CR2E034 (10/97)