

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # P94000002243 (1)

1. Corporation Name

PRELUDE CUSTOM HOMES, INC.



Principal Place of Business

**304 SOUTH BELCHER ROAD
CLEARWATER FL 34618**

Mailing Address

**P.O. BOX 6187
CLEARWATER FL 34618**

3. Date Incorporated or Qualified
01/10/1994

3a. Date of Last Report
03/23/1995

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Country

29. Country

9. Name and Address of Current Registered Agent

**GEORGE, THOMAS E
2682 CRYSTAL CIRCLE
DUNEDIN FL 34698**

4. FEI Number
59-3218081

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Printed Name of Registered Agent or Director

Date of Signature

12. OFFICERS AND DIRECTORS

1. NAME	D	☐ DELETE
2. STREET ADDRESS	GEORGE, THOMAS E	
3. CITY, ST, ZIP	304 SOUTH BELCHER ROAD	
4. NAME		☐ DELETE
5. STREET ADDRESS		
6. CITY, ST, ZIP		☐ DELETE
7. NAME		
8. STREET ADDRESS		
9. CITY, ST, ZIP		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		☐ DELETE
13. NAME		
14. STREET ADDRESS		
15. CITY, ST, ZIP		☐ DELETE
16. NAME		
17. STREET ADDRESS		
18. CITY, ST, ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	☐ Change ☐ Addition
5. NAME	
6. STREET ADDRESS	
7. CITY, ST, ZIP	☐ Change ☐ Addition
8. NAME	
9. STREET ADDRESS	
10. CITY, ST, ZIP	☐ Change ☐ Addition
11. NAME	
12. STREET ADDRESS	
13. CITY, ST, ZIP	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	☐ Change ☐ Addition

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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96 813-461-7716
Date Date of Filing

CR2E034 (12/95)