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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCU 1. Corporatio	on Name	"# P94 0 .UB HILLS DEVEL		00795 ENT CO., II	•	1)						
Principal Place of Business Mailing Address									19811981 19 1914 1184 08114			#
2000 COUNTRY CLUB DRIVE EUSTIS FL 32726 US				2000 COUNTRY CLUB DRIVE EUSTIS FL 32726 US								
									 Date Incorporated or Qualified 01/31/1994 	За.	Date of Last 05/01/	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number	I		Applied For	
21 Suite Ant	# etc		26	26				·	E0-222000			Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc					5. Certificate of Status Desired			5 Additional Required
City & State				City & State				6. Election Campaign Financing		\$5.0	00 May Be	
Zip 24	Country			Zip	Countr	У		Trust Fund Contribution 8. This corporation has liability for	intang	ible tax under s	led to Fees s 199.032,	
[24]	o Name	and Address of Curre		29 30				Florida Statutes 🔀 Yes 🔲 No				
	g, Ivanio	and Acoress of Culfe	ent neg	istered Agent		81	Nan	10. Name and Address of New Registered Agent				
CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST. TALLAHASSEE FL 32301						82			(0.0.1)			
								er Addre	Address (P.O. Box Number is Not Acceptable)			
TALLARASSEE PL 3230)						83						
						84	1					?ip Code
11. Pursuant t	to the provisi	ons of Sections 607.050	2 and 6	07.1508, Florid	a Statutes	s, the above	I named	corporal	ion submits this statement for the nur	nose (FL 69 2	registered office
familiar wi	th, and accep	ot the obligations of, Sec	nda suc ction 600	cn change was 7.0505, Florida	authorizei Statutes	d by the con	poration	i's board	ion submits this statement for the pur of directors. I hereby accept the appr	ointme	nt as registere	d agent. I am
SIGNATURE		or printed ann e of registered ager										
12.		OFFICERS AN			(NOTE	Flagistered Age	nt signatu	re required v		DA		
TITLE	DP			☐ DELI	ETE	1.1 TITLE		···	ADDITIONS/CHANGES TO OFF	ICERS	AND DIRECTO	
NAME		ann huffstetle				1.2 NAME					Change	Addition
STREET ADDRESS 2000 COUNTRY CLUB DRIV			IVE	•		13STREE	13 STREET ADDRESS					Í
CITY-ST-ZIP	EUSTI	S FL				1.4 CITY-5	ST-ZiP					
TITLE	DV			DEL E	ETE	2. 1 1:TLE		†		··	Change	[] Addition
NAME	HUFFS	STETLER, L.R. J				2.2 NAME						
STREET ADDRESS							ADDRESS	3				ļ
CITY-ST-ZIP		G HILL FL				2.4 CHY- 9	7 - 715					
TITLE	DST	TETIER I R I		DELF	116	3 1 TITLE					☐ Change	Addition
NAME OTOSSY ADDRESS		Stetler, L. R. I Akeshore dr				3.2 NAME						
STREET ADDRESS	EUSTI					33 STREE	T ADDRES	s [ì
CITY-ST-ZIP TITLE	LOOIN	9 I L		C) box	76	3 4 CITY - S	7-216	<u> </u>				
NAME				☐ DELE	: +C	4 1 TOTLE					Change	Addition
STREET ADDRESS						4.2 NAME		l				
CITY-ST-ZIP						4.3 STREET						
TITLE				DELE	TF	4.4 City - S 5. 1 TiTLE	1-ZIP					
NAME				L Pett		5. I TITLE 5.2 NAME					☐ Change	Addition
STREET ADDRESS						5.3 STREET	ADDOCCO					[
CITY-ST-2IP						5.3 STREET						
TITLE	····			DELE	TE	6. 1 TITLE	1 · Z IF	 			FT Change	□ Mester
NAME						6.2 NAME					Change	☐ Addition
STREET ADDRESS							ADDRESS					ĺ
CITY-ST-ZIP					6.3 STREET ADDRESS 6.4 C(1)Y-ST-Z(P							
14 I do hereby	cortify that the	ha information a model	. 241 41 2									

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR