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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

DOCUMENT # P9400009531 (2)

NOUVELLE MAISON BUILDERS, INC.

Principal Place 15310 AMBERL SUITE 250-65 TAMPA FL 336 US		Mailing Address 16057 TAMPA PALMS BLVD WI SUITE # 231 TAMPA FL 33647-2001 US	16057 TAMPA PALMS BLVD WEST SUITE # 231 TAMPA FL 33647-2001		3. Date Incorporated or Qualified 3s. Date of Last Report 02/07/1994 09/23/1996				
2 Principal f	Place of Business	2a. Mailing Address			02/07/1994 4. FEI Number	Uajzoj		nted C	
	Place of Business  5 Amberly Dr.	26 Address			59-3223665		<del></del>	plied For at Applicable	
Suite. Apt		Suite, Apt. #, etc.		····				Additional	
22		27			Certificate of Status Desired	<u> </u>	Fee Re		
City & Stat	pa FL	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t		
Zip 23	(U) Gountry (IC	Zip	Countr	y	8. This corporation has liability for			199.032,	
24 5 5	647 <sub>25</sub> 'US	29 30	L.,	_,	Florida Statutes	Yes X			
	9. Name and Address of Curr	ent Registered Agent		T Ni.	10. Name and Address of New i	Registered Age	ent		
	NRY, STEVEN M	•	81	Name					
16057 TAMPA PALMS W., #231				Street A	eet Address (P.O. Box Number is Not Acceptable)				
TAN	MPA FL 33647		83						
			•	<u> </u>					
			84	City		FL '	<b>85</b> Zip (	Code	
11, Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statutes 1	he abo	e-named	corporation submits this statement for the	e purpose of ch	l nanging it	s registered	
office or	registered agent, or both, in the Sta	ate of Florida. Such change was auth ligations of, Section 607.0505, Florida	orized b	y the corp	oration's board of directors. I hereby acc	cept the appoin	tment as	registered	
	Stgrimme typical or printed name of registered a			ent signature :	required when reinstating)	DATE			
12.		AND DIRECTORS	13.	······································	ADDITIONS/CHANGES TO OF	FICERS AND D	PECTOR		
TITLE	DVT	☐ DELETE	1.1 TITLE				Change	Addition	
NAME	YEARY, STEVEN M		1.2 NAME		5100 Burchette	16th., 19	103		
STREET ADDRESS	1			ADDRESS	5100 Burchette Tampa GL 3	3647			
CITY-ST-ZIP	TAMPA FL 33647	DELETE	14 CITY- 21 TITLE	ST-ZIP	14-64 12 -	/	Change	Addition	
TITLE NAME	BROWN, CRAIG W	F-1 PECTIC	22 NAME			<b></b>	, vienge	E AQUITOR	
STREET ADDRESS	ADENI PIELO I AAD			t address					
DITY-ST-ZIP	WESLEY CHAPEL FL		2.4 CITY	ŀ					
TITLE	HANGE VIEW DE LE	DELETE	3.1 TRILE	OI LIF		. L	Change	Addition	
NAME		_	3.2 NAME				•		
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY-ST-2(F			3.4. CITY-	ST-ZIP					
TITLE		DELETE	4.1 TITLE			<u> </u>	Change	Addition	
NAME			4. 2 NAM	:					
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY-ST-ZIP			4.4 City	ST-ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAME	ļ					
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY - ST - ZIP		<u> </u>	5.4 CITY	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition Addition	
NAME			6.2 NAME						
STREET ADDRESS	.]		6.3 STREE	T ADDRESS					

6.4 CITY-ST-ZIP

**SIGNATURE:** 

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 changed, of on an attachment with an address.

**FILED** 

Feb 13 1997 8:00am

Secretary of State

- Proprior of the Police Angle County County