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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

P94000019847 (0) DOCUMENT # 1. Corporation Name

CASTLE BUILDERS OF NORTHWEST FLORIDA, INC.

Principal Place of Business	Mailing Address			
4790 DAVIS LN CRESTVIEW FL 32536	4780 DAVIS LN CRESTVIEW FL 32536			
2. Principal Place of Business	2a. Mailing Address			

## **FILED** May 05 1998 8:00am Secretary of State



Principal Plac	e or Business	Maining Addres	SS			
4780 DAVIS L CRESTVIEW F		4790 DAVIS LI Crestview Fi	) . 32536			
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 03/09/1994
2. Principal P	lace of Business	2a. Mailing Add	ress			4. FEI Number Applied For
21		26				59-3238144   Not Applicable
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			
22		27	7			5. Certificate of Status Desired Fee Required
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	<u>a</u>			Trust Fund Contribution Added to Fees
Zip	Country	Zφ	Zip Country			8. This corporation owes or has paid the current year Intangible
24	25	29	30	]		Personal Property Tax due June 30.  Yes No
	9. Name and Address of Cu	urrent Registered Agent				10. Name and Address of New Registered Agent
BR/	ADFORD, DANNY E			81	Name	е
479	00 DAVIS LN			82	Ctron	at Address (P.O. Box Number is Not Acceptable)
CRI	ESTVIEW FL 32536			02	3000	at Aduress (P.O. Box Number is Not Acceptable)
				83		
				84	City	FL 85 Zip Code
11. Pursuant I	to the provisions of Sections 607	.0502 and 607.1508. Flor	ida Ŝtatutes.	the above	e-name	d corporation submits this statement for the nurpose of changing its registered
office or re	egistered agent, or both, in the S	State of Florida, Such cha	nge was auth	orized by	the co	orporation's board of directors. I hereby accept the appointment as registered
	in laminar with, and accept the C	obligations bt, Section 60	.0505, Florida	a Statutes	3.	
SIGNATURE	Signature, typed or profud name of registers	on acy of and little if annil cable	(NOTE: Bo	nistered And	nt signatu	ure required when reinstating) DATE
12.		AND DIRECTORS	1	13.	- K Biginoio	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	] []	ELETE	1.1 18TLE		Change Addition
NAME	<b>Brad</b> ford, Danny E			1.2 NAME		
STREET ADDRESS	4790 DAVIS LN			1.3 STREET	ADDRESS	
CITY-ST-ZIP	CRESTVIEW FL 32536			1.4 CITY-S		
TITLE	V	]	ELETE	21 TITLE	1 £11	Change Addition
NAME	<b>BRADFORD</b> , DANNY E JR			2.2 NAME		
STREET ADDRESS	4790 DAVIS LN			2.3 STREET	ADDRESS	
CITY-ST-ZIP	CRESTVIEW FL 32536			2. 4 CITY - S		
TITLE	81		ELETE	3.1 TITLE	11-611	Change Addition
NAME	<b>Brad</b> ford, Lana Q			3.2 NAME		
STREET ADDRESS	4790 DAVIS LANE		j	3.3 STREET	ADDRESS	,]
CITY-ST-ZIP	CRESTVIEW FL 32539			34. CITY-S		
TITLE			ELETE	4.1 TITLE	1-14	Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	YUUDEGG	
CITY-ST-ZIP				4.4 CITY-SI		
TITLE			ELE <b>TE</b>	5.1 TrTLE	1 - ZIF	Change Addition
NAME				5.2 NAME		
STREET ADDRESS					4 DADESS	
				5.3 STREET		
CITY-ST-ZIP TITLE		[] n	ELETE	5.4 CITY-ST	- ZIP	Channe Ladding
1		<b>□</b> <sup>(</sup>	LLLIL	6.1 TITLE		Change Addition
NAME			ľ	6.2 NAME		
STREET ADDRESS				63 STREET	ADDRESS	
CITY-ST-ZIP	artifut that the information quarter	al call that filler de-		64 CITY-SI	- ZIP	

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, pr on an attachment with an officers.

(850)