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

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 11 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000028144 (1)**

1. Corporation Name
**PETER HOMES, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 4521 PGA BLVD #191<br>PALM BEACH GARDENS FL 33418 | 4521 PGA BLVD #191<br>PALM BEACH GARDENS FL 33418 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/04/1994
3a. Date of Last Report:

2. Principal Place of Business
21 12877 Orange Blvd
Suite, Apt. #, etc. 22
City & State 23: West Palm Beach, Fl 33412
Zip 24: 33412 Country 25: USA

2a. Mailing Address
26 12877 Orange Blvd
Suite, Apt. #, etc. 27
City & State 28: West Palm Beach, Fl 33412
Zip 29: 33412 Country 30: USA

4. FEI Number: [redacted] 65-0493745 ☐ 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

9. Name and Address of Current Registered Agent

**RYSMAN, PETER**
**4521 PGA BLVD #191**
**PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 12877 Orange Blvd
83
84 City: West Palm Beach **FL** 85 Zip Code: 33412

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: Peter Rysman, Peter Rysman 4-7-95
(Signature of new registered agent, if changed) (Name of Registering Agent, typed or printed) (Date)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | President | 11 TITLE | ☐ Change ☒ Addition |
| NAME | Peter Rysman | 12 NAME | |
| STREET ADDRESS | 12877 Orange Blvd. | 13 STREET ADDRESS | |
| CITY-ST-ZIP | West Palm Beach, FL. 33412 | 14 CITY-ST-ZIP | |
| TITLE | Vice President | 21 TITLE | ☐ Change ☐ Addition |
| NAME | Susan MacLearn | 22 NAME | |
| STREET ADDRESS | 12877 Orange Blvd. | 23 STREET ADDRESS | |
| CITY-ST-ZIP | W.P.B., FL. 33412 | 24 CITY-ST-ZIP | |
| TITLE | Secretary | 31 TITLE | ☐ Change ☐ Addition |
| NAME | Peter Rysman | 32 NAME | |
| STREET ADDRESS | 12877 Orange Blvd. | 33 STREET ADDRESS | |
| CITY-ST-ZIP | W.P.B., FL. 33412 | 34 CITY-ST-ZIP | |
| TITLE | Treasurer | 41 TITLE | ☐ Change ☐ Addition |
| NAME | Peter Rysman | 42 NAME | |
| STREET ADDRESS | 12877 Orange Blvd. | 43 STREET ADDRESS | |
| CITY-ST-ZIP | W.P.B., FL. 33412 | 44 CITY-ST-ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | |

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)(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 13 or Block 14 above, or on an attachment with an addition.

SIGNATURE: Peter Rysman 4-7-95 407-798-0700
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #
Peter Rysman

0894101 CP