FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000039356 (8)**

1. Corporation Name

ISLANDER HOMES OF SAN MARCO INC.

Principal Place of Business	Mailing Address
2644 OAKLAND PARK BLVD. FORT LAUDERDALE FL 33306	2644 OAKLAND PARK BLVD. FORT LAUDERDALE FL 33306

3. Date Incorporated or Qualified: **05/25/1994**
3a. Date of Last Report: **02/07/1995**

4. FEI Number: **65-0493710** ☐ 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

2. Principal Place of Business
21 2409 E LAS OLAS BLVD
22 Suite, Apt. #, etc.
23 City & State: FT LAUDERDALE, FL
24 Zip: 33301 25 Country: US

2a. Mailing Address
26 P.O BOX 2485
27 Suite, Apt. #, etc.
28 City & State: FT LAUDERDALE, FL
29 Zip: 33303-2485 30 Country:

9. Name and Address of Current Registered Agent

NELLIS, WILLIAM
2644 E. OAKLAND PARK BLVD.
FORT LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

81 Name: HAROLD S BOFSHEVER
82 Street Address (P.O. Box Number is Not Acceptable): 2455 E SUNRISE BLVD, SUITE 917
83
84 City: FT LAUDERDALE FL 85 Zip Code: 33304

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: HAROLD S. BOFSHEVER 2/14/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	NELLIS, WILLIAM		1.2 NAME	NELLIS, WILLIAM	
STREET ADDRESS	2644 E OAKLAND PARK BLVD		1.3 STREET ADDRESS	300 NE 11 AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP	FT LAUDERDALE, FL. 33301	
TITLE	VPST	☐ DELETE	2.1 TITLE	VPST	☒ Change ☐ Addition
NAME	MURPHY, RAYMOND L		2.2 NAME	MURPHY, RAYMOND L	
STREET ADDRESS	2644 E OAKLAND PARK BLVD		2.3 STREET ADDRESS	2409 E LAS OLAS BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL		2.4 CITY-ST-ZIP	FT LAUDERDALE, FL. 33301	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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)(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: RAYMOND L MURPHY 954-523-8784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)