

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 26, 1999 8:00 am
Secretary of State

03-26-1999 90039 035 ***150.00

DOCUMENT # P94000059379

1. Corporation Name
ABC HOME BROKERS INC.

Principal Place of Business

18060 N. TAMiami TRAIL
N. FORT MYERS FL 33917
US

Mailing Address

18060 N. TAMiami TRAIL
N. FORT MYERS FL 33917
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1994

4. FEI Number

65-0515379

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CLARK, JEFFREY
18060 N TAMiami TRAIL
NORTH FT MYERS FL 33917

10. Name and Address of New Registered Agent

81 Name *Jeffery Clark*
82 Street Address, P.O. Box Number is Not Acceptable
18060 N. Tamiami Trail
83 *NPM, FL 33917*
84 City *NPM* FL 85 Zip Code *33917*

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	CLARK, JEFFERY	18060 N TAMiami TRAIL	N FT MYERS FL 33517	<input type="checkbox"/>
	CLARK, NOEL	18060 N. TAMiami TRAIL	N. FT. MYERS FL	<input type="checkbox"/>
	BRENNAN, BETSY	18060 N. TAMiami TRAIL	N. FORT MYERS FL 33917	<input type="checkbox"/>
	PETTRY, ELWOOD	18060 N. TAMiami TRAIL	N. FORT MYERS FL 33917	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
	P. ELWOOD Pettry	19060 W Tamiami Trail	NPM, FL 33917	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	V.P. ELWOOD Pettry	18060 W Tamiami Trail	NPM, FL 33917	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	S. ELWOOD Pettry	18060 N. TAMiami Trail	NPM, FL 33917	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	T. ELWOOD Pettry	18060 W. Tamiami Trail	NPM, FL 33917	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)