Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90099 045 \*\*\*150.00

## 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

## DOCUMENT # P94000062985

i. Corporation	INdille						
HANSON'S DEVELOPMENT, INC.					I ARBOYRAN MIR MANIK RIBIN ABINY RANKA ABINY A	ANIE BIRNO (JOHO POJE)	LALLAN ANN MARK
						ANS ANS (US AND )	
Principal Place	e of Business	Mailing Address				911 <b>0 6</b> 111 <b>8</b> 11 <b>010</b> 1 <b>0</b> 183	
700 A1A		P.O. BOX 3351					
JUPITER FL 33477 TEQUESTA FL 33469							
					DO NOT WRITE IN TI	HIS SPACE	
					3. Date Incorporated or Qualifed		į
	Land Bushington	2a. Mailing Address			08/23/1994 4. FEI Number	TAN	plied For
<del></del>	lace of Business					<del>   </del>	t Applicable
21	# ***	Suite Apt # etc	Suite, Apt. #, etc.		65-05 19722	\$8.75	
Suite, Apt.	#, etc.	— · · ·			5. Certifcate of Status Desired	Fee Re	•
City & State		City & State			6. Election Campaign Financing	\$5.00	·
23		28	٠		Trust Fund Contribution	Added t	
Zip	Country	Zip	Countr	ν	8. This corporation owes the current year		
24	25	· _	30	•	Personal Property Tax.	Yes	□No
24	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Register	ed Agent	
***	1		8	1 Name			
RATI	HKE, CAROLA S		_	2 01 1411	(D.C. D. M. when in Not Appartable)		<del></del>
700 A1A			8:	Street Add	ress (P.O. Box Number is Not Acceptable)		
JUPITER FL 33477			8:	3			
							2.1.
			84	4 City	F	<b>= L</b>   85   Zip (	-ode
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obligation of the state o	tions of, Section 607.0505, Florid	ida Statute	5.	poration submits this statement for the purpose ion's board of directors. I hereby accept the appear when reinstating)	_	gistered
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD ·	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	RATHKE, RICHARD C	,	1.2 NAME	:			
STREET ADDRESS	700 A1A		1.3 STREET ADDRESS				
CITY+ST-ZIP	JUPITER FL 33477		1.4 CITY-	ST-ZIP			
TITLE	V	☐ DELETE	2.1 TITLE			Change	Addition
NAME	RATHKE, CAROLA S		2.2 NAME				
STREET ADDRESS	1000 N US HWY 1 #662		2.3 STRE	ET ADORESS			
CITY-ST-ZIP	JUPITER FL 33477		2. 4 CITY-	·ST-ZIP			
TITLE -	STD-	— DELETE	- 3.1 TITLE	-	A CONTRACTOR OF THE PROPERTY O	Change	☐ Addition
NAME -	CARY, JAMES		3.2 NAME	:			
STREET ADDRESS	19900 JUPITER BEACH RD #6	04	3.3 STRE	ET ADORESS			
CITY-ST-ZIP	TEQUESTA FL 33469	•	3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAM	<b>E</b>			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	-		☐ Change	☐ Addition
NAME			5.2 NAME	:			
STREET ADDRESS	•		5.3 STRE	ET ADDRESS			
CITY ST 7ID			5.4 CITY-	ST-ZIP			

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

7460980

Change

☐ Addition