PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000065374**1. Corporation Name

VENTURA HOMES, INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90081 016 ***150.00



Principal Place	e of Business	Mailing Address		J INDRINGE IND TORIN DIGIT UNTIL GRAIN OUT OUT OUT OF HER CONTRACTIONS TO BE CONTRACTED TO SECOND TO SECOND STATE OF THE CONTRACT OF THE CONTR
14853 W 159TH ST 1		14853 W 159TH ST LOCKPORT IL 604412		
US .		US	ـــ ب	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 09/06/1994
2. Principal P	lace of Business	2a. Mailing Address	. 40	4. FEI Number Applied For
21 1801	BRANTLEY Rd	26 1801 BRANT	-ley KX	36-3970298 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	MYCAS FI	City & State 28 FT. MYCN	FI	6. Election Campaign Financing S.00 May Be Trust Fund Contribution Added to Fees
Zip 335	Country	Zip 29 33507 30	Country	8. This corporation owes the current year Intangible Personal Property Tax. Yes No
24 30 2	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registered Agent
81 Name				
LITTLE, ALLEN				Address (P.O. Box Number is Not Acceptable)
1801 BRANTLEY ROAD			82 Street	Address (F.O. Dox Humber is Not Acceptable)
UNIT #1607			83	
FT. I	MYERS FL 33907		84 City	■ 85 Zip Code
•				FL []
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				
,	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Reg ND DIRECTORS	gistered Agent signature n	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 TITLE	P
NAME	LITTLE, ALLEN C		1.2 NAME	LITTLE, Aller
STREET ADDRESS	14853 W 159TH ST	·	1.3 STREET ADDRESS	1801 BRANHey RR #1607
CITY-ST-ZIP	LOCKPORT IL		1.4 CITY-ST-ZIP	FT AVERS F1 33507
TITLE	S	☐ DELETE	2.1 TITLE	S DChange ☐ Addition
NAME	LITTLE, ALLEN C.		2.2 NAME	LITTLE Allen
STREET ADDRESS	14853 W 159TH ST		2.3 STREET ADDRESS	1801 BRANTLY RL AILUT
CITY-ST-ZIP	LOCKPORT IL		2. 4 CITY-ST-ZIP	FT MY(N) F1 33507
-TITLE~	. T	□ DELETE	3.1 Ț∏LĒ	Change ☐ Addition
NAME	LITTLE, ALAN		3.2 NAME	LITTLE, Alka
STREET ADDRESS	14853 W 159TH ST		3.3 STREET ADDRESS	1801 BLANTRY RL #1637
CITY-ST-ZIP	LOCKPORT IL		3.4. CITY-ST-ZIP	FT MYCH FL 33507
TITLE		☐ DELETÉ	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP	Change Addition
TITLE		C) DEFEIG	5.1 TITLE 5.2 NAME	
NAME			5.3 STREET ADORESS	
STREET ADDRESS			5.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE	1.41-7-	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	_
			6.3 STREET ADDRESS	
STREET ADDRESS				

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 organ attachment with an address with all other like empowered.

SIGNATURE: