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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400069908 (9)

TITAN HOMES, INC.

Principal Place of Business

4959 M. MENINERY DI VI

Mailing Address

4962 M. MEMMENY DIVIN

## **FILED** Apr 28 1997 8:00am Secretary of State



TAMPA FL 33609				TAMPA FL 33609-2230							
								3. Date Incorporated or Qualified 09/20/1994	3a. Date 04/29		Report
2. Principal P	lace of Busine	ess	2a.	2a. Mailing Address				4. FEI Number	•	·	pplied For
<u> </u>				26				59-3274726		No	ot Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & State				27   City & State							equired
23				City & State				6. Election Campaign Financing			May Be
Zip	Country			Zip Country			<del></del>	Trust Fund Contribution			
24	9	5	29	30			,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
9. Name and Address of Current				11				10. Name and Address of New Registered Agent			
CAS	TELLANO, A	NTHONY P				81	Name				
4257 W. KENNEDY BLVD.				00 00000			Division	700 D. Marke a Marke			
TAMPA FL 33609					82 Street Ad			ddress (P.O. Box Number is Not Acceptab	ole)		ľ
						83			· · · · · · · · · · · · · · · · · · ·		
						84	City		FL!	8 <b>5</b> Zip (	Code
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 agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE											
12.			RS AND DIREC		13.		<u>-</u>	ADDITIONS/CHANGES TO OFFIC		RECTOR	IS IN 12
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NAME	CASTELLA	no, diana			1.2 N	AME					
STREET ADDRESS		ennedy blyd			1.3 S	TREET	ADDRESS				
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NAME					2.2 N	AME	1				İ
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STREET ADDRESS							*DODECC				
					· ·		ADDRESS				
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I do 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 an attachment with an address.