## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

P94000072986 (0)

HOLDMAR, INC.

BETTER BUILT HOMES OF FLORIDA INC.

Pencipal Place of Business

Mailing Address

**FILED** Mar 14 1996 8:00 am Secretary of State



2324 RUNYON CT 14275 LORD BARKLEY DRIVE ORLANDO FL 32837 US	2324 RUNYON CT 14275 LORD BARKLEY DRIVI ORLANDO FL 32837 US	E	3. Date Incorporated or Qualified 10/05/1994	3a. Date of Last Report 08/10/1995
2. Frincipal Place of Business 28. 21 7616 SouthLand Blud. 26	Mailing Address 76/6 South La	nd Blu	4. FEI Number	Applied For Not Applicable
Suite, Apt. #. etc. [22] 105 [27]	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State [23] OALANDO, FL [28]	ORLANDO	FL	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
24 33809 25 ORANGE 29	33809 30	ORANG		<b>⊠</b> No
g. Name and Address of Culrent Regis	tered Agent	81 Name	10. Name and Address of New R STEPHEN R. Lo	
BAIRD, J. BRIAN 225 E ROBINSON ST			ddress (P.O. Box Number is Not Acceptab	ONFY
SUITE 450		83 20	1	
, ORLANDO FL 32801		84 City (	ORLANDO	FI 85 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  Structure, by et of inited many of registered agent and blind applicable.  (NOTE: Registered Agent signature required when reinstating)  DATE				
12. OFFICERS AND DIRECT TRUE DPST		3. 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
NAME MARSAN, JEAN STEEL LADDRESS 2324 RUNYON CT	1,	2 NAME 3 STREET ADDRESS		
CITY - ST-ZIF . ORLANDO FL THLE NAME	∏ DELFTE 2 2	4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET AODRESS	V.P FINANCE 4 SECRE GILLES OUELLETTE 1765 SUMBA AVE	TARY Change Addition
STREET ACCITIES   CITY STITUTE		4 City - St - Zip	ORLANDO, FL 32	837
TOTALE NAME STREET ADDRESS	3.	1 TITLE 2 NAME 3 STREET ADDRESS	•	Change Addition
O1Y - S1 - 7IP	3	4 CITY - S1 - ZIP		Change Addition
TILE NAMI	_	2 NAME		
STHEL: ADDRESS  CITY ST-ZIP		3 STREET ADDRESS 4 CITY-ST-ZIP	80000 <b>1</b> 7 -03/15/9601	43988 017004
Table F	DELETE 5	1 TITLE 2 NAME	***208.75	☐ Change ☐ Addition
STRELT ACCHESS CHY-S1-ZIF	_ ·	3 STHEET ADDRESS 4 City - St - Zip		
TITLE NAME	6	1 TITLE 2 NAME 3 STREET ADDRESS		☐ Change ☐ Addition
STREET ADORESS  City - S1 - Zip  14 Lido horeby certify that the information supplied with this	6	4 CITY - ST - ZIP	ify for the exemption stated in Section 119	07(3)(k), Florida Statutes. I further

rice increase certify that the information indicated on this aring is voluntarily infrished and does not qualify for the exemption stated in Section 119.07(5)(k), Florida Statutes, Turther 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 eath; 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:

O \_\_\_\_\_\_ C; ILES OUELLETTE 3/4/96 (407) 856-1010