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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089233 (8)

1. Corporation Name

FLORIDA SUNCOAST HOMES, INC.



Principal Place of Business

30 CAMELIA COURT
OLDSMAR FL 34677

Mailing Address

P.O. BOX 2017
PALM HARBOR FL 34682-2017

3. Date Incorporated or Qualified

12/01/1994

3a. Date of Last Report

03/27/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

30 CAMELIA COURT

27

Suite, Apt. #, etc.

OLDSMAR, FLORIDA

28

City & State

29

Zip

34677

Country

USA

30

9. Name and Address of Current Registered Agent

DHALWALL, JOGINDER S
55 KELLY'S TRAIL
OLDSMAR FL 34677

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

30 CAMELIA COURT

83

84 City

FL

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

Joginder S Dhalwall Pres.

4/24/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME DHALWALL, JOGINDER S
STREET ADDRESS 30 CAMELIA COURT
CITY - ST - ZIP OLDSMAR FL 34677

TITLE VP ☐ DELETE

NAME DHALWALL, JEAN C
STREET ADDRESS 30 CAMELIA COURT
CITY - ST - ZIP OLDSMAR FL 34677

TITLE D ☒ DELETE

NAME DHALWALL, HARPAUL
STREET ADDRESS 30 CAMELIA COURT
CITY - ST - ZIP OLDSMAR FL 34677

TITLE D ☒ DELETE

NAME DHALWALL, AVTAR S
STREET ADDRESS 325 PALM DALE DR
CITY - ST - ZIP OLDSMAR FL 34677

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED Jean S Dhalwall

4/24/97

813-891-1013

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)