

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000089651 (1)**

1. Corporation Name

**NORTH FLORIDA CLASSIC HOMES, INC.**



Principal Place of Business

Mailing Address

200 W FORSYTH ST  
SUITE 1600  
JACKSONVILLE FL 32202

200 W FORSYTH ST  
SUITE 1600  
JACKSONVILLE FL 32202

2. Principal Place of Business

2a. Mailing Address

21 **8081 Philips Hwy**  
22 **Suite 14**  
23 **Jacksonville FL**  
24 **32256** 25 **Duval**

26 **8081 Philips Hwy**  
27 **Suite 14**  
28 **Jacksonville FL**  
29 **32256** 30 **Duval**

3. Date Incorporated or Qualified **12/12/1994** 3a. Date of Last Report **05/01/1995**

4. FEI Number **59-3282841** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes.  Yes  No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**HOUSTON, CLARENCE H JR**  
**200 W FORSYTH ST**  
**SUITE 1600**  
**JACKSONVILLE FL 32202**

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607 (F) and 607.15(6) 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 607.04(1), Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>HOUSTON, CLARENCE H JR</b>	
STREET ADDRESS	<b>200 W FORSYTH ST SUITE 1600</b>	
CITY- ST- ZIP	<b>JACKSONVILLE FL 32202</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>SHAFFER, MARTY</b>	
STREET ADDRESS	<b>8081 PHILLIPS HIGHWAY, SUITE 14</b>	
CITY- ST- ZIP	<b>JACKSONVILLE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	<b>William H. Walter Jr</b>
13 STREET ADDRESS	<b>8081 Philips Hwy Ste 14</b>
14 CITY- ST- ZIP	<b>Jacksonville, FL 32256</b>
21 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	<b>Hinda Schaedel</b>
23 STREET ADDRESS	<b>8081 Philips Hwy Ste 14</b>
24 CITY- ST- ZIP	<b>Jacksonville, FL 32256</b>
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	<b>Wendy C. Nickman</b>
33 STREET ADDRESS	<b>8081 Philips Hwy Ste 14</b>
34 CITY- ST- ZIP	<b>Jacksonville, FL 32256</b>
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	<b>Chris W. Vanzant</b>
43 STREET ADDRESS	<b>8081 Philips Hwy Ste 14</b>
44 CITY- ST- ZIP	<b>Jacksonville, FL 32256</b>
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	<b>Deborah M. Goddard</b>
53 STREET ADDRESS	<b>8081 Philips Hwy Ste 14</b>
54 CITY- ST- ZIP	<b>Jacksonville, FL 32256</b>
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not constitute an exemption under Section 19.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplement to 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 trustee or officer of a trust or employee of a corporation or partner as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing or in an attachment with an affidavit.

SIGNATURE: **Chris Vanzant** 3/26/96 904-777-800

CR2E034 (12/95)