

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000029386 (6)

1. Corporation Name

VASCO BUILDERS, INC.

Principal Place of Business

Mailing Address

16204 N. NEBRASKA AVE., SUITE C
LUTZ FL 33549

16204 N. NEBRASKA AVE., SUITE C
LUTZ FL 33549



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent

VAN BEBBER, ROBERT W
912 BRIDGETT LANE
LUTZ FL 33549

914 BRIDGETT LANE
LUTZ, FLORIDA 33549

3. Date Incorporated or Qualified

3a. Date of Last Report

04/14/1995

4. FEI Number

65-0582618

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

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 607.0502 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. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME BEBBER, WILLIAM H III
STREET ADDRESS 15123 LAKE MAGDALENE BLVD.
CITY-STATE-ZIP TAMPA FL 33618

TITLE VD ☐ DELETE

NAME BEBBER, ROBERT W
STREET ADDRESS 912 BRIDGETT LANE
CITY-STATE-ZIP LUTZ FL 33549

TITLE SD ☐ DELETE

NAME BEBBER, WILLIAM H
STREET ADDRESS 301 DEBURL ROAD
CITY-STATE-ZIP LUTZ FL 33549

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

TITLE PD
NAME VAN BEBBER, WILLIAM H III
STREET ADDRESS
CITY-STATE-ZIP

TITLE VD ☒ Change ☐ Addition

NAME VAN BEBBER, ROBERT W
STREET ADDRESS 914 BRIDGETT LANE
CITY-STATE-ZIP

TITLE SD ☒ Change ☐ Addition

NAME VAN BEBBER, WILLIAM H
STREET ADDRESS 301 DEBURL ROAD
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME 000001746720
STREET ADDRESS -03/18/96--01044--006
CITY-STATE-ZIP ***200.00

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS

CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

PS 3/18/96