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FILED

Mar 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000033094 (0)

1. Corporation Name

JACK CARAVELLO HOMES INC

Principal Place of Business

Mailing Address

5990 GILLOTT BLVD.
PT. CHARLOTTE FL 33981

5990 GILLOTT BLVD.
PT. CHARLOTTE FL 33981



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/24/1995

4. FEI Number

65-0629165

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 12423 QUINLAN AVE.

Suite, Apt. #, etc.

22

City & State

23 PORT CHARLOTTE FL.

Zip

24 33981

Country

25 CHARLOTTE

2a. Mailing Address

26 12423 QUINLAN AVE.

Suite, Apt. #, etc.

27

City & State

28 PORT CHARLOTTE FL.

Zip

29 33981

Country

30 CHARLOTTE

9. Name and Address of Current Registered Agent

CARAVELLO, JACK
5990 GILLOTT BLVD.
PT. CHARLOTTE FL 33981

10. Name and Address of New Registered Agent

81 Name

JACK CARAVELLO

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

12423 QUINLAN AVE

83

84 City

PORT CHARLOTTE

FL

85 Zip Code

33981

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

JACK CARAVELLO

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

(NOTE: Registered agent signature required when reinstating)

3-14-98

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE D ☒ DELETE

NAME CARAVELLO, JACK
STREET ADDRESS 5990 GILLOTT BLVD.
CITY-ST-ZIP PT. CHARLOTTE FL 33981

1.2 TITLE D ☒ DELETE

NAME CARAVELLO, DOROTHY
STREET ADDRESS 5990 GILLOTT BLVD.
CITY-ST-ZIP PT. CHARLOTTE FL 33981

1.3 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Pres: D ☒ Change ☐ Addition

NAME JACK CARAVELLO
STREET ADDRESS 12423 QUINLAN AVE.
CITY-ST-ZIP PORT CHARLOTTE FL - 33981

2.1 TITLE Sec: D ☒ Change ☐ Addition

NAME DOROTHY CARAVELLO
STREET ADDRESS 12423 QUINLAN AVE.
CITY-ST-ZIP PORT CHARLOTTE FL - 33981

2.2 TITLE ☐ Change ☐ Addition

2.3 TITLE ☐ Change ☐ Addition

2.4 TITLE ☐ Change ☐ Addition

2.5 TITLE ☐ Change ☐ Addition

2.6 TITLE ☐ Change ☐ Addition

2.7 TITLE ☐ Change ☐ Addition

2.8 TITLE ☐ Change ☐ Addition

2.9 TITLE ☐ Change ☐ Addition

2.10 TITLE ☐ Change ☐ Addition

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2.12 TITLE ☐ Change ☐ Addition

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2.16 TITLE ☐ Change ☐ Addition

2.17 TITLE ☐ Change ☐ Addition

2.18 TITLE ☐ Change ☐ Addition

2.19 TITLE ☐ Change ☐ Addition

2.20 TITLE ☐ Change ☐ Addition

14. I 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 207, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JACK CARAVELLO

JACK CARAVELLO

3-14-98 - 097-0456

CR2034 (10/97)