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FILED
May 02 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 # P95000049417 (5)

1. Corporation Name
TOWNHOMES NORTH, INC.



Principal Place of Business

~~2901 W. SR434~~
~~#181~~
LONGWOOD FL 32729

Mailing Address

~~4215 SOUTHPOINT BLVD.~~
~~STE 100~~
JACKSONVILLE FL 32216-0999

2. Principal Place of Business

21 1 Bay Gull Court

Suite, Apt. #, etc.

22

City & State

23 Daytona Beach, Florida

Zip

Country

24 32119

25 US

2a. Mailing Address

26 1 Bay Gull Court

Suite, Apt. #, etc.

27

City & State

28 Daytona Beach, Florida

Zip

Country

29 32119

30 US

9. Name and Address of Current Registered Agent

ANSBACHER, LEWIS
4215 SOUTHPOINT BLVD.
SUITE 100
JACKSONVILLE FL 32216

3. Date Incorporated or Qualified

06/23/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3327821

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

TITLE ☐ DELETE

NAME DVS SCHWARTZ, WINSTON

STREET ADDRESS ~~2901 W. SR434~~

CITY-ST-ZIP LONGWOOD FL 32779

TITLE ☐ DELETE

NAME DPT ADLEY, JAMIE

STREET ADDRESS ~~2901 W. SR434~~

CITY-ST-ZIP LONGWOOD FL 32779

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

1 Bay Gull Court
Daytona Beach, Florida 32119

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

1 Bay Gull Court
Daytona Beach, Florida 32119

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 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] JAMIE ADLEY

4/15/97 (904) 760-2555

CR2E034 (9/96)