

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000060302 (3)

CORNERSTONE HOME BUILDERS, INC.



Principal Office Address

Mailing Address

18303 TIMBERLAN DR
LUTZ FL 33549

18303 TIMBERLAN DR
LUTZ FL 33549

2. Principal Office Address

2a. Mailing Address

21

26

City, State, Zip

22

27

City, State, Zip

23

28

City, State, Zip

24

29

City, State, Zip

9. Name and Address of Current Registered Agent

BRONSTEIN, JOEL D
150 SECOND AVE N
SUITE 1100
ST PETERSBURG FL 33701

81. Name

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

83

84. City

FL 85. Zip Code

11. I, the undersigned, being a resident of this State, do hereby certify that the above named corporation is a corporation organized under the laws of this State, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office.

CHANGES

12

OFFICERS AND DIRECTORS

13

D
BRONSTEIN, STEPHEN H
18303 TIMBERLAN DR
LUTZ FL 33549

[] DELETED

[] DELETED

[] DELETED

[] DELETED

[] DELETED

[] DELETED

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DP

[X] Change [] Addition

TS
BRONSTEIN, DAVID
18303 TIMBERLAN, DR.
LUTZ, FL 33549

[] Change [X] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

14. I, the undersigned, being a resident of this State, do hereby certify that the information supplied with this statement is true and correct, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office, and that I am a duly qualified and authorized agent of said corporation to execute this statement for the purpose of changing its registered office.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96

813-689-4645

CR2E034 (12/95)