

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 # P95000062973 (9)

1. Corporation Name

JENKINS BUILDERS OF WINTER PARK, INC.

RECEIVED MAY 2 1996



Principal Place of Business

2304 ALOMA AVENUE
WINTER PARK FL 32792

Mailing Address

2304 ALOMA AVENUE
WINTER PARK FL 32792

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

3. Date Incorporated or Qualified

08/15/1995

3a. Date of Last Report

4. FFI Number

59 333 1118

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

PHILLIP CUNY

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

2304 ALOMA AVE.

83

84 City

WINTER PARK

FL

85 Zip Code

32792

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 607.0503, Florida Statutes.

SIGNATURE

Phillip Cuny

PHILLIP CUNY

PRESIDENT

5/31/96

Signature of registered agent must be accompanied by a copy of the resolution of the board of directors authorizing the change.

Signature of registered agent must be accompanied by a copy of the resolution of the board of directors authorizing the change.

Date

12. OFFICERS AND DIRECTORS

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1. TITLE

PRESIDENT / TREASURER

2. NAME

PHIL CUNY

3. STREET ADDRESS

1178 TREXWOOD BLVD

4. CITY-ST-ZIP

WINTER SPRINGS FL 32708

5. TITLE

U.R. / SECY

6. NAME

WALT BARNES

7. STREET ADDRESS

4440 WINDHAVEN LANE

8. CITY-ST-ZIP

DALLAS TX 75287

9. TITLE

Change Addition

10. NAME

Change Addition

11. STREET ADDRESS

Change Addition

12. CITY-ST-ZIP

Change Addition

13. TITLE

Change Addition

14. NAME

Change Addition

15. STREET ADDRESS

Change Addition

16. CITY-ST-ZIP

Change Addition

17. TITLE

Change Addition

18. NAME

Change Addition

19. STREET ADDRESS

Change Addition

20. CITY-ST-ZIP

Change Addition

21. TITLE

Change Addition

22. NAME

Change Addition

23. STREET ADDRESS

Change Addition

24. CITY-ST-ZIP

Change Addition

25. TITLE

Change Addition

26. NAME

Change Addition

27. STREET ADDRESS

Change Addition

28. CITY-ST-ZIP

Change Addition

29. TITLE

Change Addition

30. NAME

Change Addition

31. STREET ADDRESS

Change Addition

32. CITY-ST-ZIP

Change Addition

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 119.073(1)(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:

Phillip Cuny

PHIL CUNY

PRES

05/10/96

407 539 0080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Date of Filing

CR2E034 (12/95)