## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998

CITY-ST-ZIP

Block 12 or Block 13 if change



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000091323 (2)

LANDMARK HOMES OF CENTRAL FLORIDA, INC.

FILED
May 01 1998 8:00am
Secretary of State

A CONTRACTOR AND ACTOR CONTRACTOR CONTRACTOR

Principal Place of Business Mailing Address				- A SOURINGAN NEW COLOUR COLOU	1851 <b>0</b> (1 <b>900)</b> 1111 1 <b>0</b> 81
1010 DUNNELL RD. QUITE 1100 ALTAMONTE SPRINGS FL 32714  2513 Industrial Blud 2513 Industrial			te 1100- te 32714 odustria l Blus	DO NOT WRITE IN THIS SPACE	E
DELA	ndo 21 22824	OU and	dustrial blue 10,74. 32824	3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address	P, Tr. SOURT	4. FEI Number	Applied For
21		26		59-3349413	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & Stat	le	City & State			5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current ye	
24	25	29	30	Personal Property Tax due June 30. Yes	
64 11				10. Name and Address of New Registered Agent	
BERDER, RALPH E					
1010 SUNNELL FID., SUITE 1109 ALTAMONTE SPRINGS FL 32714			ress (P.O. Box Number is Not Acceptable)		
	513 Industrial		83		
C	KLANDO, 71. 3	2824	84 City	FL  85	Zip Code
11. Pursuant to the provisions of Sections 607 (602 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, typod or printed name of registered agent and titls if applicable (NOTE Registered Agent signature required when reinstating)  OATE					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	<b>D</b>	DELETE	1.1 TITLE	ci	
NAME	BENDER, RALPH	2012 todal	1.2 NAME		
STREET ADDRESS	1 <del>010 BUNNELL RO., CUITE 1</del>	100 Blud. Industri	13 STREET ADDRESS		
CITY-ST-ZIP	ALTAMONTE SPRINGS FL-82	744 OKLANDO, 71.32	1.4 CITY-ST-ZIP		
TITLE		DELETE	21 TITLE	☐ C	hange Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP	: .	hange Addition
TITLE NAME		[ J OLLEN	3.1 TITLE 3.2 NAME		tango EJ Roomon
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		}
TITLE		☐ DELE <b>te</b>	4.1 TITLE	CI	hange Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	i
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELE <b>te</b>	5.1 TITLE	CI	hange 🔲 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		ŀ
CITY-ST-ZIP		Deleve	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	□ CI	hange 🔲 Addition
NAME CTREET ADDRESS			6.2 NAME		

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 eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in