FILED May 19, 1999 8:00 am Secretary of State

05-19-1999 90004 004 \*1,350.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P9500093846**1. Corporation Name

IH BRANDON HOMES, INC.

Principal Place of Business				Mailing Address						!   <b>                                   </b>	
84	O1 JR MANOF	R DRIVE	JR MANOR DRIVE								
SUITE 100 TAMPA FL 33634				SUITE 100 TAMPA FL 33634				DO NOT WRITE IN THIS SPACE			
								Incorporated or Qualifed			
								1/1995			
2. Principal Place of Business				2a. Mailing Address			4. FEI N			Ap	oplied For
21	21			26				372656			ot Applicable
Suite, Apt. #, etc.			├ <del></del> ¬	Suite, Apt. #, etc.			5. Certifo	5. Certificate of Status Desired   \$8.75 Additional Fee Required			
City & State				City & State			6 Electi	6. Election Campaign Financing S5.00 May Be			
23	23			28			1	Trust Fund Contribution Added to Fees			
-	Zip	Count		Žip	Coun	try	8. This o	corporation owes the cur	rent year Inf	tangible	
24	1 .	25	29		30		l l	onal Property Tax.	•	Yes	□No
<u> </u>	1	9. Name and Addr	ered Agent				10. Name and Address of New Registered Agent				
						Name	Paucin				
PRINCE, RANDELL L						izi Street	Address (P.O. Bo	ox number is not accept	able)		
8401 JR MANOR DRIVE						S.F	HUMAKE	R LOOP E	KEWN	RICK	
	STE				[1	33		•			
TAMPA FL 33634						34 City	I E . KE	nnedy Bu	VD = 4	85 Zip	Code
						7	TAMPA		FL	- 3	602
11. Russyant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing										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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									рі іне арры	munem as re	gistered
١,	IGNATURE	, ,	· -	SEE	AMA		LETTE	R			
Ľ		Signature, typed or printed name	e of registered agent and title if	applicable. (NOTE		gent signature r	equired when reinstating		DATE		<u> </u>
-	2.		OFFICERS AND DIREC		13.		<del></del>	IONS/CHANGES TO OF	FICERS AN	ND DIRECTO	ORS IN 12
π	TLE	PD		☐ DELETE	1.1 TITL		PISIT			[#] Change	Addition
N/	AME SUAREZ, JACK D				1.2 NAM	Ε					
S1	REET ADDRESS	8401 JR MANOR D	DRIVE, SUITE 100		1.3 STR	EET ADORESS	}				
CI	TY-ST-ZIP	TAMPA FL			_	-ST-ZIP					
TI	RE :	VPST DELETE		2.1 TITL	2.1 TITLE				☐ Change	Addition	
N/	WE	PRINCE, RANDELL			2.2 NAM	Ε					
STREET ADDRESS				2.3 \$		EET ADDRESS					
CI	TY-ST-ZIP	TAMPA FL 33634			_	Y-ST-ZIP	_				
II	TLE			☐ DELETE	3.1 TITL	_	S			Change	Addition
N	AME .				3.2 NAM		FEIN E.	TEN BLOSK	• • • • •	100	
STREET ADDRESS					3.3 STR	EET ADDRESS		MANOR DR		100	
CI	TY-ST-ZIP					Y-ST-ZIP		FL 33634	<u> </u>		100,130
17	πE			☐ DELETE	4.1 TITL		5		١	Change	Addition
N	AME				4. 2 NAJ		LINDA E	. Thompson mange dr	STE	1020	
S1	TREET ADDRESS				4.3 STR	EET ADDRESS			٠, ؎٠		
C	TY-ST-ZIP					′-ST-ZIP	TAMPA,	EL 33634			
) π	TLE			□ DELETE	5.1 TITL	E	1			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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



☐ DELETE

813-886-2433

☐ Addition

P 95000093846 562168-90004-29

CHANGE OF REGISTERED AGENT WAS FILED JANUARY 29, 1999 AND IS CURRENTLY ON FILE WITH THE FLORIDA DEPARTMENT OF STATE AS INDICATED ON LINE 10. THIS NEW INFORMATION IS NOT REFLECTED BECAUSE THE FORMS WERE PREPRINTED WITH INFORMATION AS OF NOVEMBER 27, 1998. THEREFORE, A SIGNATURE IS NOT NECESSARY FOR NEW REGISTERED AGENT.