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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P96000006235 (1)

HUMBERT HOMES, INC.

Principal Place of Business

Mailing Address

FILED Feb 16 1998 8:00am Secretary of State



Trinoipa Tido		Mailing Address					
200 HIGHLAND AVE. ORMOND BEACH FL 32174		200 HIGHLAND AVE. ORMOND BEACH FL 32174			DO NOT WRITE IN THIS SPACE		
					3, Date Incorporated or Qualified		
Principal Pi	ace of Business	2a. Mailing Address			01/15/1996 4. FEI Number Applied For		
2. 7 (incipal 1	ado or pusificas	—			7 depine 4 or		
Sulte, Apt.	# Ala	Suite Apt # ete			59-3357057 Not Applicable		
22	π, θισ.	27 Solid, Apr. #, etc.	Suito, Apt. #, etc.		5. Certificate of Status Desired		
City & State	3		City & State				
		28	¬ '		6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip .	Country		8. This corporation owes or has paid the current year Intangible		
24	25 29 30		30		Personal Property Tax due June 30. Yes No		
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
	MBERT, WILLIAM		81	Name	Ю		
200 HIGHLAND AVE.			82	Street	et Address (P.O. Box Number is Not Acceptable)		
ORMOND BEACH, FL.				0.,001	A Hadiodo (Hio. Bak Hambar to Hat Nodoptable)		
DA'	YTONA BEACH FL 32174		83				
			84	City	85 Zip Code		
44 Purevant t	a the provisions of Sections 607.0	502 and 607 1609 Florida Statu	too the about		FL 50 21,0 code and corporation submits this statement for the purpose of changing its registered		
Office of re	egistered agent, or both, in the Stammar amiliar with, and accept the obline	ite of Florida. Such change was	authorized by	≀the cor	orporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NO	TE Registered Agr	ont signatur	ure required when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE ¶	PD	DELETE	1.1 TITLE		PD · McChange Addition		
NAME	HUMBERT, W.H.		1.2 NAME		HUMBERT, W.H. 200 HIGHLAND AVE DAYTONA BEACH FL 32120		
STREET ADDRESS	PO BOX 10396		1.3 STREET	ADDRESS	200 HIGHLAND AVE		
CITY-ST-ZIP	DAYTONA BEACH FL 3212	0	1.4 CITY - S		DAYTHIA BEACH FL 32/20		
TITLE	VO	DELETE	2.1 TITLE	· • · · · · · · · · · · · · · · · · · ·	Change Addition		
NAME	MIHALIC, A. TRENT		2.2 NAME				
STREET ADDRESS	200 HIGHLAND AVE.		2.3 STREET ADDRESS				
CITY-ST-ZIP	ORMOND BEACH FL 32174	l	2.4 CITY - ST - ZIP				
TITLE	0.000		3.1 TITLE		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREFT	ADDRESS			
CITY-ST-ZIP	IP		3 4. CITY - S	1 - ZIP			
TITLE		☐ DELETE	4.1 TOLE		☐ Change ☐ Addition		
NAME	4.21		4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST	I-ZIP			
TITLE	DELETE 5.1		5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET	ADDRESS	i		
CITY-ST-ZIP			5.4 CITY-SI	- ZIP			
TITLE	,	☐ DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS	,		
CITY-ST-ZIP			6.4 CITY - ST				
indicated c	on this a nnual feb ort o r supplemen	ilal annual report is true and acc	curate and the	it mv sio	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in		
Block 12 o	r Block 13 if changed, or on an ati	lachment with an address.		,	,		