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Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000017796 (9)

1. Corporation Name

IH HERNANDO HOMES, INC.



Principal Place of Business

8900 SHARON DRIVE  
NEW PORT RICHEY FL 34654

Mailing Address

8900 SHARON DRIVE  
NEW PORT RICHEY FL 34654-4228

3. Date Incorporated or Qualified

02/26/1996

3a. Date of Last Report

2. Principal Place of Business

21 8401 JR MANOR DR.

22 SUITE 100

23 TAMPA, FLA.

24 33634

25 FLA.

2a. Mailing Address

26 8401 JR MANOR DR.

27 SUITE 100

28 TAMPA, FLA.

29 33634

30 FLA.

4. FEI Number

59-3366807

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

9. Name and Address of Current Registered Agent

MCMICHAEL, WALTON H  
8401 JR MANOR DRIVE  
SUITE 200  
TAMPA FL 33634

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME SABETTA, JOHN A  
STREET ADDRESS 8900 SHARON DRIVE  
CITY-ST-ZIP NEW PORT RICHEY FL 33654

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D P ☒ Change ☐ Addition

1.2 NAME JACK D. SUAREZ  
1.3 STREET ADDRESS 8401 JR MANOR DRIVE STE 100  
1.4 CITY-ST-ZIP TAMPA, FLA. 33634

2.1 TITLE D S ☐ Change ☒ Addition

2.2 NAME WALTON H. MCMICHAEL  
2.3 STREET ADDRESS 8401 JR MANOR DR. STE 100  
2.4 CITY-ST-ZIP TAMPA, FLA. 33634

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 unchanged, or in an attachment with an address.

SIGNATURE

WALTON H. MCMICHAEL, 4/28/97 8:32/97-0890

CR2E034 (9/96)