

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

Amended

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 JUN 17 AM 9:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P960000 26568 ✓

1. Corporation Name

ARTISTIC HOME BUILDERS, INC

Principal Place of Business

Mailing Address

2520 N. TRUCKS AVE  
HERNANDO, FL 34442

2520 N. TRUCKS AVE  
HERNANDO, FL 34442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03-19-1996

4. FEI Number

59-3370755

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 owes the current year Intangible  
Personal Property Tax ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YPMA, HANS C. F  
2520 TRUCKS AVE  
HERNANDO, FL 34442

81 Name

ROBERT F. MENARD

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

2520 N. TRUCKS AVE

83

84 City

HERNANDO

FL

85

Zip Code

34442

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

ROBERT F. MENARD PRES. TREAS. Robert F. Menard

4-10-1999

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME  
PSTD  
YPMA, HANS C.  
STREET ADDRESS  
2520 N. TRUCKS AVE  
CITY-ST-ZIP  
HERNANDO, FL 34442

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

11 TITLE

PRESIDENT & TREASURER

12 NAME

ROBERT F. MENARD

13 STREET ADDRESS

2520 N. TRUCKS AVE

14 CITY-ST-ZIP

HERNANDO, FL 34442

21 TITLE

VICE PRESIDENT

22 NAME

GLEN C. SCHULTZ

23 STREET ADDRESS

2520 N. TRUCKS AVE

24 CITY-ST-ZIP

HERNANDO, FL 34442

31 TITLE

SECRETARY

32 NAME

LAURENCE SCHULTS

33 STREET ADDRESS

2520 N. TRUCKS AVE

34 CITY-ST-ZIP

HERNANDO, FL 34442

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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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.

SIGNATURE:

Robert F. Menard

4-10-1999 (352) 344-2111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (11/98)