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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000027260			
1. Corporation Name Contractors Residential Design, Inc			
Principal Place of Business 2055 WOOD STREET Suite 100 SARASOTA, FL 34237		Mailing Address 2055 WOOD STREET Suite 100 SARASOTA, FL 34237	
2. Principal Place of Business 21 2055 WOOD ST 22 Suite 100 23 SARASOTA, FL 24 34237		2a. Mailing Address 26 2055 WOOD ST 27 Suite 100 28 SARASOTA, FL 29 34237	
3. Date Incorporated or Qualified 3-22-96		3a. Date of Last Report N/A	
4. FEI Number 65-0653520		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 Jennifer L. Bonn 2055 WOOD ST Suite 100 SARASOTA, FL 34237		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 JENNIFER L. BONN (NEW ADDRESS ONLY) DATE 4/29/97 (Signature of person named as registered agent or both, if applicable) (NOTE: Registered Agent signature required when changing)			
12. OFFICERS AND DIRECTORS 11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY - ST - ZIP 11.5 TITLE 11.6 NAME 11.7 STREET ADDRESS 11.8 CITY - ST - ZIP 11.9 TITLE 11.10 NAME 11.11 STREET ADDRESS 11.12 CITY - ST - ZIP 11.13 TITLE 11.14 NAME 11.15 STREET ADDRESS 11.16 CITY - ST - ZIP 11.17 TITLE 11.18 NAME 11.19 STREET ADDRESS 11.20 CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP 12.5 TITLE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY - ST - ZIP 12.9 TITLE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY - ST - ZIP 12.13 TITLE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY - ST - ZIP 12.17 TITLE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY - ST - ZIP	
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 as appears in Block 12 or Block 13 is changed, or on an attachment with an address.			
SIGNATURE: James R. Bonn SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4/29/97 Daytime Phone # 941-957-3200	

CR2E034 (9/96)