PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000027696

1. Corporation Name

K.J. AUKER CUSTOM BUILDER, INC.

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90136 019 \*\*\*150.00



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Principal Place	e of Business	Mailing Address			
24661 CANARY ISLAND CT #102 24661 CANARY ISLAND CT #			102		
BONITA SPRINGS FL 32303 BONITA SPRINGS FL 32303				DO NOT WRITE IN THIS SPACE	
و دیده	医多霉素 医克勒特 经部份 自己 多分布的病			3. Date Incorporated or Qualifed	
•				03/25/1996	
2. Principal Place of Business 2a. Mailing Address		2a. Mailing Address		4. FEI Number	Applied For
27 3441 Lakemont UTIVC 20		251 3441 Lakemont Unive		65-0665282	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
Gity & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 CONITA DANGE, M. 28 CONTA		28 Contacophing		Trust Fund Contribution	- Added to Fees
	Country	- Ruist '	Country	8. This corporation owes the current year In	
24 3413	34   25   66	29 37137 30	الحف	Personal Property Tax.	Yes No
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81. Name You At The Control of New Registered Agent					
MOVEY CEAN D			81 Name N	nelky, Dean D.	
MCVEY, SEAN D 24661 CANARY ISLAND COURT., #102			82 Street Ad	ress (R.O.Box Number is Not Acceptable)	
BONITA SPRINGS FL 34134			2	441 Lakemont Unive	
BUN	ITA SPRINGS PL 34134		83	•	1
2001 V 15 198		A Commence of the Land	84 City Q	onita Jarinas F	85 - उपिन्द्री
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.					
agent. I a	m tamiliar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statutes.	1987年 建氯化物 特施	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TILE		Change
NAME	AUKER, KIMBERLEE J	•	1.2 NAME	Huker Cimbertie J.	ļ
STREET ADDRESS 24661 CANARY ISLAND CT #102		1.3 STREET ADDRESS 3	441 Lakemont Drive	ľ	
CITY-ST-ZIP	BONITA SPRINGS FL 33923		1.4 CITY-ST-ZIP	onital Springs FL 34134	
TITLE		☐ DELETE	2.1 TITLE	, , ,	☐ Change ☐ Addition ]
NAME			2.2 NAME		Į
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME			5.7 T. L.	•	☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME	•	☐ Change ☐ Addition
					Change Addition
CITY-ST-ZIP		<u>-</u>	3.2 NAME		
CITY-ST-ZIP TITLE	· ~.	DELETE	3.2 NAME 3.3 STREET ADDRESS		Change Addition
	· ~.	<u>-</u>	3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE		<u>-</u>	3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE		
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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 angular 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 13th changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IAME OF SIGNING OFFICER OR DIRECTOR