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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P96000032935 (4)

PERSONALIZED HOMES OF BREVARD, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
6710 SOUTH A1A 6710 SOUTH A1A						
MELBOURNE BEACH FL 32951		MELBOURNE BE	MELBOURNE BEACH FL 32951			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						04/16/1996
2. Principal P	lace of Business	2a. Mailing Addre	ess			4. FEI Number Applied For
21		26				59-3369204 Not Applicable
Suite, Apt.	#, etc.	Suite, Apl. #, etc.				S8 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be
23	28				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			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registered Agent
KINGSLEY, JOHN				"	Ivaille	_
6710 SOUTH A1A				82 Street Address (P.O. Box Number is Not Acceptable)		
ME	ELBOURNE BEACH FL 32951			83		
				63		
				84	City	FL 85 Zip Code
44 Purcuant	to the provisions of Sections 607 0%	02#und 607 1508 Florid	a Stalutes the s	1 DOV	- named	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Star	of Florida. Such chang	e was authorize	ed by	the corp	poration's board of directors. I hereby accept the appointment as registered
agent. I a	m tamiliar with and accept the abig	utions of, Section 607.0	1505, Florida Sta ングバル(2	itutes 1 / J	13	M4. 1 1050
SIGNATURE	Signatury type or printed more of the creding	pint and title if approable				required when reinstating) All J. 1958 The particular of the par
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DE	ETE 11T	ITLE		☐ Change ☐ Additing.
NAME	KINGSLEY, JOHN		1.2 NAME		ĺ	
STREET ADDRESS	6710 SAIA		1.3 \$	1.3 STREET ADDRESS		
CITY-ST-ZIP			CITY - S	T-ZIP		
TITLE	P\$VP DELETE 21T		THE		Change Addition	
NAME	KINGSLEY, JOHN		2.2 N	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	MELBOURNE BEACH FL 2		2.4(CITY-5	ST-ZIP	
TITLE	☐ DELETE 3.1		.ETE 3.1 T	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 N	IAME		
STREET ADDRESS			3.3 9	STREET	ADDRESS	
CITY-ST-ZIP		······			ST-ZIP	
TITLE	· · · · · · · · · · · · · · · · · · ·	DE	1			L Change L Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DEI		CITY-S	T-ZIP	Change L Addition
TITLE		רין מנו			J	LJ Change LJ Addition
NAME OFFICE ADDRESS			5.2 N		40000000	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		☐ DEC		HTY-S	I - ZIP	Change Addition
NAME						Change Addition
				IAME TOCCE	YDODECC	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 C	HTY-S	1-212	

I hereby confry 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 into an 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 trusted expowered 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 of the appears of the corporation of the second statutes.