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

**PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000047333 (5) FINWAY BUILDERS, INC. Mailing Address Principal Place of Business 1816 NW 38TH STREET 1816 NW 38TH STREET GAINESVILLE FL 32605 GAINESVILLE FL 32005 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/29/1996 2. Principal Place of Business 2a. Mailing 4 45 00 5W 17 TEN Applied For GA (WES V 17/5, Ha 72408 Suite, Apt. #, etc. 21 59-3395851 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State GAINISSVILLE Fla 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. **₽**⊸Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HARVEY, RUSSELL C. 1816 NW 38TH STREET **B2** Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE FL 32605 83 84 City Zip Code 85 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 apphoable. (NOTF: Registered Agent signature required when reinstating) (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE **✓** Change Addition HARVEY, RUSSELL C NAME 1.2 NAME CR2E034 4500 5W/77Er GALDENIK 32608-3912 **1816 NW 38TH ST** STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 1.4 CITY-ST-7IP DELFTE Addition TITLE 2.1 1016 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY- ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 HITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-7/P DELFTE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.