## 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 # P96000047521 (5)

WINWAL CUSTOM HOMES, INC.

Principal Place of Business Mailing Address 4855 ROYAL PINES DRIVE 4855 ROYAL PINES DRIVE **PACE FL 32571** PACE FL 32571 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3390366 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes Yes □ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WALKER, TERRANCE L Name 4855 ROYAL PINES DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **PACE FL 32571** 83 84 City Zip Code 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 it applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change 1.1 TITLE WALKER, TERRANCE L NAME 1.2 NAME 4855 ROYAL PINES DRIVE STREET ADDRESS 1.3 STREET ADDRESS **PACE FL 32571** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WALKER, JUDY W NAME 2.2 NAME 4855 ROYAL PINES DRIVE STREET ADDRESS 2 3 STREET ADDRESS **PACE FL 32571** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 31 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 trustee empowered 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.

CITY-ST-ZIP

4-30-98

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FILED

May 08 1998 8:00am

Secretary of State