**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600060771

1. Corporation Name

DOGE BAY HOMES INC

HUSE D	AT FICINES, INC.							
5		Mailing Address			<del></del>	{	H <b>a b</b> ilki <b>ba</b> kili k <b>a</b> bi	i 1 <b>000</b> 1 i/ <b>0</b> 1 i <b>00</b> 1
Principal Place		=				1		
362 GULF BREI   125	EZE PKWAY	756 TROJAN RD 125						
GULF BREEZE FL 32561 VENICE FL 34293						DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualifed		
						07/19/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		pplied For
21 Szme		26	<u> </u>			59-3396104		ot Applicable
Suite, Apt.	#, etc. <b>0</b>	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional equired
22		27 City & State						
City & Stat		City & State				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	28	Cour	ntrv		8. This corporation owes the current year		10 1 663
<b>⊢</b> ¬ '	25	<u> </u>	30			Personal Property Tax.	Yes	□No
24	9. Name and Address of Curre		30			10. Name and Address of New Registere		
				81	Name			
	ERTS, DONNA M		ļ	82	Cina at Addus	ss (P.O. Box Number is Not Acceptable)		
	CENTER RD		ļ	02	Sueer Addie	ss (P.O. Box Number is Not Acceptable)		
VEN	ICE FL 34292		.	83			•	
1				1	O11.		as 7in	Code
				84	City	F	L  85 Zip	Code
office or n	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change was au	thorized	i by tr	named corpo ne corporation	ration submits this statement for the purpose is board of directors. I hereby accept the app	of changing its pointment as re	s registered egistered
SIGNATURE		'						_
GIGITATORE	Signature, typed or printed name of registered ag	<del></del>		Agent :	signature required			000 111 40
12.	<del> </del>	ND DIRECTORS	13.		——т	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change	
TITLE	STD	☐ DELĒTE	1.1 TIT			•	□ cliange	☐ Acquion
NAME	ROLL, DONNA R		1.2 NA		}			
STREET ADDRESS	756 TROJAN RD		1.3 ST	REETA	NDDRESS			
CITY-ST-ZIP	VENICE FL 34293							
TITLE	PD CHARLES W	- Del STE	_	TY-5T-	ŽIP		Change	☐ Addition
NAME		☐ DELETE	2.1 TIT	LE	ZIP		☐ Change	☐ Addition
	ROLL, CHARLES W	☐ DELETE	2.1 TIT 2.2 NA	TLE VME			☐ Change	☐ Addition
STREET ADDRESS	756 TROJAN RD	☐ DELETE	2.1 TIT 2.2 NA 2.3 STI	TLE ME REET A	ODDRESS	:	☐ Change	☐ Addition
CITY-ST-ZIP			2.1 TIT 2.2 NA 2.3 STI 2.4 CI	TLE VME REET A ITY-ST-	ODDRESS	t	<u> </u>	
CITY-ST-ZIP	756 TROJAN RD	☐ DELETE	2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT	TLE ME REET A TTY-ST- TLE	ODDRESS .	e	☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME	756 TROJAN RD		2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA	TLE  WE  REET A  ITY-ST- TLE  WME	Noress .	:	<u> </u>	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	756 TROJAN RD		2.1 TH 2.2 NA 2.3 STI 2.4 CI 3.1 TH 3.2 NA 3.3 STI	TLE  TREET A  TTY-ST  TLE  TREET A	ADDRESS	ē	<u> </u>	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	756 TROJAN RD	☐ DELETE	2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TII 3.2 NA 3.3 STI 3.4. CI	TLE  REET A  TY-ST- TLE  REET A  TY-ST-	ADDRESS		<u> </u>	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	756 TROJAN RD		2.1 TIT 22 NA 2.3 STJ 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT	TLE TREET A TLE TREET A TREET A TTY-ST- TLE	ADDRESS	:	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	756 TROJAN RD	☐ DELETE	2.1 TIF 2.2 NA 2.3 STI 2.4 CI 3.1 TII 3.2 NA 3.3 STI 3.4 CI 4.1 TIII 4.2 NA	TLE TREET A TY-ST- TLE TY-ST- TLE AME TY-ST- TLE AME	ADDRESS ADDRESS - ZIP	:	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	756 TROJAN RD	☐ DELETE	2.1 TIF 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NV 4.3 ST	TLE  TREET A  TY-ST- TLE  TREET A  TY-ST- TLE  AME  TREET A	ADDRESS ADDRESS ADDRESS ADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	756 TROJAN RD	☐ DELETE	2.1 TIF 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NV 4.3 ST 4.4 CI	TLE TY-ST- TLE AME TY-ST- TLE TY-ST- TY-ST- TY-ST-	ADDRESS ADDRESS ADDRESS ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	756 TROJAN RD	☐ DELETE	2.1 TIF 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NV 4.3 ST	TLE  REET A  TY-ST- TLE  AME  REET A  TY-ST- TLE  REET A  TY-ST- TLE	ADDRESS ADDRESS ADDRESS ADDRESS	- 3	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	756 TROJAN RD VENICE FL 34293	☐ DELETE	2.1 TIT 2.2 NA 2.3 STU 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 4.2 NV 4.3 STI 4.4 CII 5.1 TIT 5.2 NA	REET A TY-ST- TLE THE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE	ADDRESS ADDRESS ADDRESS ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	756 TROJAN RD VENICE FL 34293	☐ DELETE	2.1 TIT 22 NA 2.3 STJ 2.4 CI 3.1 TIT 3.2 NA 3.3 STT 3.4 CI 4.1 TIT 4.2 NA 4.3 STT 4.4 CIT 5.1 TIT 5.2 NA 5.3 STT	REET A TY-ST- TLE THE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE	ADDRESS ADDRESS ADDRESS ZIP ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	756 TROJAN RD VENICE FL 34293	☐ DELETE	2.1 TIT 22 NA 2.3 STJ 2.4 CI 3.1 TIT 3.2 NA 3.3 STT 3.4 CI 4.1 TIT 4.2 NA 4.3 STT 4.4 CIT 5.1 TIT 5.2 NA 5.3 STT	REET A TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TREET A TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE	ADDRESS ADDRESS ADDRESS ZIP ADDRESS	:	☐ Change	Addition Addition

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADORESS

SIGNATURE:

STREET ADDRESS

VALUE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90133 049 \*\*\*150.00