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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1998 8:00am

Secretary of State

☐ Change

Addition

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000102076 (2)

CORNERSTONE SELECT HOMES, SEG INC.

Principal Place of Business Mailing Address 1077 HIGHWAY ATA P.O. BOX 729 **SATELLITE BEACH FL 32937** MELBOURNE FL 32902 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-34 16888 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DEHARDER, ROBERT 1077 HIGHWAY A1A Street Address (P.O. Box Number is Not Acceptable) SATELLITE BEACH FL 32937 83 Zip Code 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 punted make of registered agent and title if applicable (NOT) Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE □ DELETE 1.1 TITLE ☐ Change Addition **DEHARDER, ROBERT** NAME 1.2 NAME 1077 HIGHWAY A1A STREET ADDRESS 1.3 STREET ADDRESS **SATELLITE BEACH FL 32937** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Y Change 2.1 TITLE Addition WADDELL, JUANITA 1085 N. AIA #603 WARREN, JUANITA NAME 22 NAME 1095 NORTH A1A., #603 STREET ADDRESS 23 STREET ADDRESS TNDIALANTIC FI. 32903 **INDIALANTIC FL 32903** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Addition NAME 3.2 NAME 1077 HWY AIA STREET ADDRESS 3.3 STREET ADDRESS F1. 32937 CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CHY-ST-ZIP DELETE

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 collocations 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 cl or on an attachment with an address

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS