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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jul 22 1998 8:00am Secretary of State

P97000056261 (5) DOCUMENT # ADVANCED HOMES, INC. Principal Place of Business Mailing Address 3856 WILDER BLYD 3856 WILDER BLVD FERNANDINA BOH FL 32034 FERNANDINA BCH FL 32034 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/25/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3456997 Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes **■** No Personal Property Tax due June 30. 24 25 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent wilder, Kenny 81 3856 WILDER BLVD 82 Street Address (P.O. Box Number is Not Acceptable) FERNANDINA BCH FL 32034 83 84 City 85 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. June 23, 1998 SIGNATURE Stgnature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. reasurer Donna K. wilder **Addition** DELF1E Change 1.1 TITLE TITLE **WILDER, KENNY** NAME 1.2 NAME 3856 Wilder Blvd. 3856 WILDER BLVD STREET ADORESS 1.3 STREET ADDRESS Fernan; dina Beach, Florida 32034 **FERNANDINA BCH FL 32034** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition TITLE 21 TITLE yonn, Timmy NAME 2.2 NAME 4208 SUMMER BREEZE DR STREET ADDRESS 2.3 STREET ADDRESS **FERNANDINA BCH FL 32034** CITY-ST-ZIP 2.4 CITY-ST-ZiP X DELETE 3 1 TITLE Change Addition TITLE POWELL, DOYL NAME 3.2 NAME RT 1 BOX 1250 STREET ADDRESS 3.3 STREET ADDRESS HILLARD FL 32046 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY+ST-ZIP DELETE Change Addition 6111118 THILE NAME 6.2 NAME STREET ADDRESS **6.3 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 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.

CIONATURE House (2) Cla Page