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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90031 008 ***150.00

DOCUMENT # P97000095702

1. Corporation Name

SILVER	DOVE HOMES INC.								
Principal Place	e of Business	Mailing Address				i i talitee n ti n i a uti i ta in oe int se	itt es tst ookto ii	YA ri B urk Lebuk B	Person inden seder
733 ENSENADA DRIVE ORLANDO FL 32825 US 733 ENSENADA DRIVE ORLANDO FL 32825 US US					İ	DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						11/07/1997			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	olied For
21		26				59-3170259	·		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Rec	
City & State	e	City & State				6. Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution		Added to	Fees
Zip 24	Country Zip Co 25 29 30		Count	try		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes			□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New F	legistered A	igent	
			8	31 N	lame				
HUGHES, CHARLES R 733 ENSENADA DRIVE			8	32 S	treet Addres	ss (P.O. Box Number is Not Accepta	ible)		
ORLANDO FL 32825			E	33					
				34 C	ity			85 Zip C	ode
				ļ	•		FL	\ <u>\</u>	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut	thorized t	by the	amed corpor corporation	ration submits this statement for the 's board of directors. I hereby accep	purpose of o t the appoin	tment as reg	registered jistered
SIGNATURE	γ	0							
	Signature, typed or printed name of registered agen	<u> </u>		gent sig	nature required v	when reinstating) ADDITIONS/CHANGES TO OF	DATE	DIRECTO	DS IN 12
12.	OFFICERS AND	DELETE	13.		·· ·	ADDITIONS/CHANGES TO OF	TICENS AIN	☐ Change	Addition
TITLE	STPD	L.J DELETE	1.1 1112		l				
NAME	HUGHES, LAUREL T		1.3 STRI		DDEEC]
STREET ADDRESS	733 Ensenada drive Orlando FL 32825								}.
CITY-ST-ZIP	URLANDO FL 32823	□ DELETE	1.4 CITY 2.1 TITLE		<u></u>			Change	Addition
TITLE			2.2 NAM		Ì				_ }
NAME			2.3 STRI		npess				
STREET ADDRESS	*		2.4 CIT						
CITY-ST-ZIP			3.1 TITL					Change	Addition
NAME -			3.2 NAM	ιE	-				}
STREET ADDRESS			3.3 STRI	EET ADI	DRESS	•			Ì
CITY-ST-ZIP	•		3.4. CIT						ļ
TITLE		☐ DELETE	4.1 TITL	E				Change	Addition
NAME			4.2 NAN	Æ					
STREET ADDRESS			4.3 STRI	EET ADI	DRESS		•		ļ
CITY-ST-ZIP			4.4 CITY	-ST-ZIF	p				
TITLE		☐ DELETE	5.1 ₹∏L	E				☐ Change	Addition
NAME			5.2 NAM	E					
STREET ADDRESS			5.3 STR	EET ADI	DRESS				Ì
CITY-ST-ZIP			5.4 CITY		Р		<u> </u>		
TITLE		☐ DELETE	6.1 TITL		-			Change	☐ Addition
NAME			6.2 NAM						}
STREET ADDRESS	(1986) 1 (1986) 4		6.3 STR	EET ADI	DRESS				

CITY-ST-ZIP 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 changely, or on an attachment with an address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS