

04/28/99 WED 13:39 FAX

KIRK PINKERTON

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

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90030 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katharine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000103912 ✓					
1. Corporation Name STEVE LAWRENCE HOMES, INC.					
Principal Place of Business 8362 CYPRESS HOLLOW DR. SARASOTA, FL. 34238			Mailing Address		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified JAN. 1, 1998	
4. FEI Number 65-0799948		Applied For ☐ Not Applicable		5. Certificate of Status Desired ☐ * \$8.75 Additional Fee Required.	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent DAVID M. SILBERSTEIN 720 SOUTH ORANGE AVE. SARASOTA, FL. 34236					

DO NOT WRITE IN THIS SPACE

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 agent 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 607.0504, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NO FE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT / TREASURER ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STEVE LAWRENCE	1.2 NAME	
STREET ADDRESS	8362 CYPRESS HOLLOW DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL. 34238	1.4 CITY-ST-ZIP	
TITLE	SECRETARY / VICE PRESIDENT ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LORI LAWRENCE	2.2 NAME	
STREET ADDRESS	8362 CYPRESS HOLLOW DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL. 34238	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ 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		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: **F. STEPHEN LAWRENCE***F. Stephen Lawrence*

4-29-99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR