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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

## Jun 18, 1999 8:00 am **Secretary of State**

06-18-1999 90012 008 \*\*\*558.75

1999		DIVISION OF CORPORATIONS
DOCUMENT #	P98000032916	
1. Corporation Name	Cagni Estate Homes Inc.	
	1475 S. Belche	r Road

5//852 - 90012 - 8 Largo, Florida 33771 Principal Place of Business Mailing Address 1475 S Belcher Road P.O. Box 4100 DO NOT WRITE IN THIS SPACE Largo, Florida 33771 Clearwater, Florida 33758 3. Date Incorporated or Qualifed April 9, 1998 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address ---\*Not 'Applicable ~59~3503534~ 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Country 8. This corporation owes the current year Intangible Zip Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Judy Mitchell 1475 S Belcher Road Street Address (P.O. Box Number is Not Acceptable) LLargo, Florida 33771 83 Zip Code 84 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE ☐ Change ☐ Addition 1.1 TITLE MLE President/Titlesuccer 1.2 NAME NAME Judy Mitchell 1.3 STREET ADDRESS STREET ADDRESS 327 Lotus Path 1 4 CITY-ST-ZIP CITY-ST-ZIP Clearwater, Fl 34616 ☐ Addition ☐ DELETE 21 TITI F Change TITLE Vice President 2.2 NAME NAME Mark Cagni 2.3 STREET ADDRESS STREET ADDRESS 1440Devon Drive 2.4 CITY-ST-ZIP CITY-ST-ZIP Clearwater, Fl 33767 Change Addition TITLE DELETE 3.1 TITLE Secretary 3.2 NAME NAME Darlene Hunt 3 3 STREET ADORESS STREET ADDRESS 4606 W GrayyStreet #209 3.4. CITY-ST-ZIP CITY-ST-ZIP Та<del>шра, F1. 33609</del> ☐ Change ☐ Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, pr on an attachment with an address, with all other like empowered.

SIGNATURE:

6/11/99

727:531-1466

Daytime Phone #

(11/98)CR2E034