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

DOCUMENT # **P98000067799**

1. Corporation Name BOARDHOME, INC.

Principal Place of Business

707 E HWY 98. SUITE H

DESTIN FL 32541

Mailing Address

707 E HWY 98. SUITE H DESTIN FL 32541

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90249 038 ***150.00



DO NOT WRITE IN THIS SPACE

					DO NOT WRITE IN T	THO OF AGE	
					3. Date Incorporated or Qualifed 07/30/1998		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	1 /	Applied For
21		26	26				lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	7 - · · · ·	Additional
22		27	27		G. Garanous et Giardo Desired	Fee	Required
City & State		City & State	City & State		6. Election Campaign Financing	•	🕽 May Be 🦈
23		28			Trust Fund Contribution	Added	to Fees
Zip	— — · — · —		Country	•	8. This corporation owes the current year		DINO.
24	25 29 30		D]		Personal Property Tax.	☐ Yes	-LIMNO
	-9. Name and Address of Cur	rent Registered Agent	81	. N	10. Name and Address of New Register	red Agent	
HUI	MĖS, LINDA		81	Name	•		
	E HWY 98, SUITE H		82 Street Add		ddress (P.O. Box Number is Not Acceptable)		
	FIN FL 32541			ļ <u>-</u>			
DES	HIN FE 32341		83				
			84	City		85 Zij	Code
		<u></u>				FL Joy	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes,	, the abov	e-named corporati	poration submits this statement for the purpos ion's board of directors. I hereby accept the a	se of changing to oppointment as	ts registered reaistered
agent. I a	m familiar with, and accept the obl	igations of, Section 607.0505, Florida	a Statutes	ine corporad 3.	contraction of discourse of the contraction of the		
SIGNATURE							
	Signature, typed or printed name of registered	<u> </u>		nt signature require	ed when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		OPS IN 12
12.		AND DIRECTORS	13.	-7	ADDITIONS/CHANGES TO OFFICER	☐ Change	
TITLE .	D LIGHTO LINDA	☐ DELETE	1.1 TITLE			Onling	
NAME	HOLMES, LINDA		1.2 NAME				İ
STREET ADDRESS	PROTEIN ST. DOCAL			TADDRESS			ļ
CITY-ST-ZIP			1.4 CITY-S	T-ZIP	. <u></u>	Clobana	Addition
TITLE	D	☐ DELETE	2,1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP	DESTIN FL 32541 2.4		2. 4 CITY-	ST-ZIP			
TITLE -		- ' DELETE	3.1 TITLE	• •		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE	☐ DELETE 4.1°		4.1 TITLE			Chang	e 🗀 Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP			
TITLE	☐ DELETE 5.1		5.1 TITLE			Chang	e
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY- 9	ST-ZIP			
TITLE		☐ DELETE	6.1 TTTLE			☐ Chang	e
NAME			6.2 NAME				}
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	ST-ZIP			ļ
GIT-SI-ZIP	<u> </u>	t with this filing does not qualify for th			Section 119 07(3)(i) Florida Statutes I furthe		information

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 informati 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:

