

00 JUL 27 AM 6:58

1. Entity Name
AVENUE HOME BUILDERS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
P.O. BOX 1435
WINDERMERE FL 34786

Mailing Address
P.O. BOX 1435
WINDERMERE FL 34786

AS



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
12627 Butler Bay Ct.

3. Mailing Address
12627 Butler Bay Ct.

City & State
Windermere Fl.

City & State
Windermere Florida

4. FEI Number
59-3589592

Zip
34786

Country
USA

Zip
34786

Country
USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STAPE, LYNDA
12627 BUTLER BAY COURT
WINDERMERE FL 34786

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME STRAPE, FRANK
STREET ADDRESS P.O. BOX 1435
CITY-ST-ZIP WINDERMERE FL 34786

TITLE
NAME Stape Frank
STREET ADDRESS 12627 Butler Bay Court
CITY-ST-ZIP Windermere, Fl. 34786

TITLE VSD
NAME STRAPE, LYNDA
STREET ADDRESS P.O. BOX 1435
CITY-ST-ZIP WINDERMERE FL 34786

TITLE
NAME Stape Lynda
STREET ADDRESS 12627 Butler Bay Ct
CITY-ST-ZIP Windermere, Fl. 34786

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lynda Stape*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: July 12, 2000 407.9093
Daytime Phone #

CR2E034 (5/00)

2000
AVENUE HOME BUILDER'S INC.

◆◆◆
12627 Butler Bay Court ◆ Windermere, Florida 34786 ◆ USA
Phone 407-909-9035 ◆ Fax 407-876-8604

July 12, 2000

Florida Department of State
P.O. Box 1500
Tallahassee, Florida 32314

Ms. Kathrine Harris,

As you can see our names have been spelled wrong. Also, the address that they have sent this report to was not occupied by us at the time. The address that we used is 12627 Butler Bay Court. We feel that we really had no control over us not receiving the report in the first place. We would appreciate any help that you can give us in this matter.

Sincerely,
Frank and Lynda Stape
Frank and Lynda Stape