

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 10:53

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # S14435 (9)

1. Corporation Name

ALL AMERICAN HOMES OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

**1100 FIFTH AVENUE SOUTH
SUITE 101
NAPLES FL 33940**

Mailing Address

**1100 FIFTH AVENUE SOUTH
SUITE 101
NAPLES FL 33940**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/07/1990

3a. Date of Last Report

07/29/1994

4. FEI Number

65-0233697

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 1100 Fifth Avenue South

Suite, Apt. #, etc.

22 Suite 401

City & State

23 Naples, FL

Zip

24 33940

Country

25 USA

2a. Mailing Address

26 1100 Fifth Avenue South

Suite, Apt. #, etc.

27 Suite 401

City & State

28 Naples, FL

Zip

29 33940

Country

30 USA

9. Name and Address of Current Registered Agent

**CRONIN, DENNIS
1167 THIRD STREET SOUTH
SUITE 107
NAPLES FL 33940**

10. Name and Address of New Registered Agent

81 Name

Richard Taylor

82 Street Address (P.O. Box Number is Not Acceptable)

1100 Fifth Avenue South

83

Suite 401

84 City

Naples

FL

85 Zip Code

33940

11. Pursuant to the provisions of Sections 607.01, 607.02, 607.03, 607.04, 607.05, 607.06, 607.07, 607.08, 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 responsibility, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

Richard Taylor

3/7/95

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

KAYE, STUART O.

STREET ADDRESS

1100 FIFTH AVE SO.

CITY - ST - ZIP

NAPLES FL

TITLE

V

NAME

TAYLOR, RICHARD D.

STREET ADDRESS

1100 FIFTH AVENUE, SOUTH Suite 401

CITY - ST - ZIP

NAPLES FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Director, Pres., Treasurer

☒ Change

☐ Addition

1.2 NAME

Kaye, Stuart O.

1.3 STREET ADDRESS

1100 Fifth Avenue South Suite 401

1.4 CITY - ST - ZIP

Naples, FL 33940

2.1 TITLE

VP - Finance, Secretary

☒ Change

☐ Addition

2.2 NAME

Taylor, Richard D

2.3 STREET ADDRESS

1100 Fifth Avenue South Suite 401

2.4 CITY - ST - ZIP

Naples, FL 33940

3.1 TITLE

VP - Construction

☐ Change

☒ Addition

3.2 NAME

Adamczyk, Jack

3.3 STREET ADDRESS

1100 Fifth Avenue South Suite 401

3.4 CITY - ST - ZIP

Naples, FL 33940

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 this 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 of this report, or in an attachment with an address.

SIGNATURE:

Stuart O. Kaye

3/7/95

(813) 649-1952

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

TELEPHONE NUMBER