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

**PROFIT** CORPORATION ANNUAL REPORT

1999



Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris

04-29-1999 90209 002 \*\*\*150.00

DOCU	VENI # \$15609	3			
1. Corporation Name					
ESSEX E	Builders Group, Inc.				
Principal Place of Business Mailing Address					
2221 LEE ROAD 2221 LEE ROAD					
SUITE 20 SUITE 20 WINTER PARK FL 32789 WINTER F		WINTER PARK FL 32789			DO NOT WRITE IN THIS SPACE
US US					3. Date Incorporated or Qualifed
					11/26/1990
2. Principal Place of Business 2a. Mailing Address		2a. Mailing Address			4. FEI Number Applied For
		26			59-3037297 ★ Not Applicable
#·		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27	27		5. Certificate of Status Desired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Zip Country Zip		Country		8. This corporation owes the current year Intangible
24	25 29		0	7 district in party is an	
	9. Name and Address of Curre	ent Registered Agent		т	10. Name and Address of New Registered Agent
			81	Name	
STOREY, EDWARD A., II			82		Address (P.O. Box Number is Not Acceptable)
235 STIRLING AVE					
WINT	ER PARK FL 32789		83		
			84	City	85 Zip Code
				'	FL   <u> </u>
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	the abov	e-named co	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was aut lations of, Section 607,0505, Florid	norized by da Statute	tne corpor s.	pration's board of directors. I hereby accept the appointment as registered
SIGNATURE				-	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	Registered Age	nt signature req	equired when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CEO	☐ DELETE	1.1 TITLE	İ	Change [] Abdulon
NAME	STOREY, EDWARD A., II		1.2 NAME		
STREET ADDRESS	235 STIRLING AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP		
TITLE	PRES	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	Storey, Carol R.		2.2 NAME		
STREET ADDRESS	235 STIRLING AVE		2.3 STREE	TADORESS	
CITY-ST-ZIP	WINTER PARK FL		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. CRY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	:	
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE	· -	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS		•	5.3 STREE	TADDRESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	
true	DELCT CAT		6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	
3011-31-EIF				1	I

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:

Daytime Phone #