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Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90089 020 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **V16452**

1. Corporation Name
AMERICAN HOMEBUILDERS, INC.

Principal Place of Business: 8535-28 BAYMEADOWS RD. JACKSONVILLE FL 32256
 Mailing Address: 8535-28 BAYMEADOWS RD. JACKSONVILLE FL 32256



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/24/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3127110	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
SHEFFIELD, J. HOWARD 4209 BAYMEADOWS RD., STE. 4 JACKSONVILLE FL 32217				81	Name	
				82		Street Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	FL

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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALIL, DONALD W JR.	1.2 NAME	V
STREET ADDRESS	4439 BARNABY DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32217	1.4 CITY-ST-ZIP	
TITLE	CBD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OLIVER, HOWARD	2.2 NAME	
STREET ADDRESS	2745 LASDOWNE DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MONTGOMERY AL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWENS, PAUL D JR.	3.2 NAME	
STREET ADDRESS	315 BELLEVILLE AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BREWTON AL 36426	3.4 CITY-ST-ZIP	
TITLE	VST <input type="checkbox"/> DELETE	4.1 TITLE	PST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, M. CRAIG	4.2 NAME	
STREET ADDRESS	8535-28 BAYMEADOWS RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32256	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTGOMERY, MITCHELL	5.2 NAME	
STREET ADDRESS	9000 REGENCY SQUARE BLVD., #201	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32211	5.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIGLER, ELLEN F	6.2 NAME	
STREET ADDRESS	8535-25 BAYMEADOWS RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	6.4 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: **12/2/99** **904 448-1144**

CR2E034 (1/1/98)