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CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V27690

(9)

1. Corporation Name

ANDERSON/LOYD HOMES INC.

Principal Place of Business

9375 101ST AVE
VERO BEACH FL 32966
US

Mailing Address

PO BOX 781247
SEBASTIAN FL 32978-1247
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/07/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3120635

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 4001 57TH TERRACE

Suite, Apt. #, etc.

22 VERO BEACH, FL

City & State

23

Zip

24 32966

Country

25 USA

2a. Mailing Address

26 P.O. Box 781247

Suite, Apt. #, etc.

27

City & State

28 SEBASTIAN FL

Zip

29 32978

Country

30 US

9. Name and Address of Current Registered Agent

ANDERSON, FREDERICK W.
9375 101ST AVE
VERO BEACH FL 32967

10. Name and Address of New Registered Agent

81 Name

JOHN A. LLOYD

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

4001 57TH TERRACE

83

84 City

VERO BEACH

FL

85 Zip Code

32966

11. Pursuant to the provisions of Sections 607.032 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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CITY - ST - ZIP

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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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 119.07(3)(k), 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. I changed, or on an attachment with an address.

SIGNATURE:

John A. Lloyd - John A. Lloyd

4-25-95

407-778-5777