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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V32703

HOMES BY DESIREE, INC.

Principal P ace of Business

Mailing Address

## Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90300 041 \*\*\*150.00



1776 OAK GROVE DR., SOUTH GREEN COVE SPRINGS FL 32043		1776 OAK GROVE DH SOUTH GREEN COVE SPRINGS FL 32043		DO NOT WRITE IN TH	e edace		
					3. Date Incorporated or Qualifed	3 SFACE	
					04/29/1992		
a Dinaina D	lace of Business	2a. Mailing Address			4. FEI Number	l Ap	tied For
	lace of Business				59-3119924		Applicable
21 Cuita Aut	# oto	Suite, Apt. #, etc.	_			\$8.75 A	
Suite, Apt.	#, etc.	27		5. Gertificate of Status Desired Fee Required			
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	Mav Be
23		28			Trust Fund Contribution	Added to	
Zip Country		Zip Country		8. This corporation owes the current year intangible			
24	25 29		30		Personal Property Tax.		[]No
	9. Name and Address of Current		1		10. Name and Address of New Registered	l Agent	
			8	Name			ļ
	EN, MICHAEL E.		-	32 Street Ac	dress (P.O. Box Number is Not Acceptable)		
3168	3 HWY 17		٩	Jueel AC	(acousti, O. Dox (asimos) is not receptable)		
OFIA	NGE PARK FL 32073		8	33			
			L			85 Zip (	· · · da
`\$\$50, \$4.0	<b>建筑物外大</b> 小人。2011	AND THE PROPERTY OF THE PARTY O	8	City	FI	_   <b>85</b>   Zip 0	inde Tar nigh
	to the provisions of Sections 607.0502	and 607:1508. Florida Statu	es, the abo	ove-named co	proporation submits this statement for the purpose	of changing its	ragistered
I office or r	registered agent, or both, in the State (	o Fiorida. Such change was a	iumorizea t	by the corpora	tion's board of cirectors. I hereby accept the app	ointment as re	gistered
agent. la	m familiar with, and accept the obligat	ions of, Section 607,0000, Fit	rida Statuti	es.			
SIGNATURE	Signature, typed or printed nai is of registered agen	t and trile if anninghia (NOT)	- Registered A	nent signature regu	red when reinstating) DATE		
12.		DIRECTORS	13.	<u>, , , , , , , , , , , , , , , , , , , </u>	ADDITIC'NS/CHANGES TO OFFICERS /	ND DIRECTO	FS IN 12
TITLE	P	DELETE	1.1 TITLE	E		Change	Addition
NAME	OWNBY, DESIREE L.		1.2 NAM	E [			
STREET ADDRESS	1		13 STR	EET ADDRESS			
CITY-ST-ZIP	GREEN COVE SPRINGS FL		1.4 CITY				
TITLE	V	☐ DELETE	2.1 TITLE			Change	Addition
NAME	OWNBY, ROBERT J.	_	2.2 NAM				
				EET ADDRESS			
STREET ADDRESS	1776 OAK GROVE DR., S. GREEN COVE SPRINGS FL		4	Y-ST-ZIP			
CITY-ST-ZIP TITLE	GREEN COVE SPRINGS FL	DELETE	3.1 TITL			Change	Addition
			3.1 11L			_ •	
NAME			1	EET ADDRESS			
STREET ADDRESS			H	ŀ			
CITY-ST-ZIP		☐ DELETE	4.1 TITL	Y-ST-ZIP		Change	Addition
TITLE			4. 2 NAM			_ •	_
NAME	)		1	Ĩ			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.1 TITL	-ST-ZIP		Change	Addition
TITLE	1	F) DEFEIE	5.1 IIILI 5.2 NAM	1		_ 52.190	
NAME							
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY	-ST-ZIP		☐ Change	Addition
TITLE		DELETE .	6.2 NAM			□ change	
NAME .						,	
STREET ADDRESS				EET ADDRESS .	. , .	;	,
CITY-ST-ZIP	the second was a	<u> </u>	(6,4 CITY	r-ST-ZIP	and the second s	. <del> </del>	

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 is 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 trusted 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:

eeownbu

Prisidera