

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 164090

Entity Name: LAUREL HOMES, INC.**Current Principal Place of Business:**498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**498 PALM SPRINGS DRIVE
SUITE 100
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 59-0634185**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RIDGWAY, JANET L
498 PALM SPRINGS DRIVE
ALTAMONTE SPRINGS, FL 32701 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SD
Name	RIDGWAY, JANET L
Address	498 PALM SPRINGS DRIVE
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	V
Name	ROBINSON, JOSEPH D, V
Address	3201 CARDINAL DRIVE, P-5
City-State-Zip:	VERO BEACH FL 32963

Title	DAS
Name	ROBINSON, LAURA CARROLL
Address	498 PALM SPRINGS DRIVE, SUITE 100
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	PD
Name	ROBINSON, PETER G
Address	3201 CARDINAL DRIVE, P-5
City-State-Zip:	VERO BEACH FL 32963

Title	V
Name	ROBINSON, DEEELLEN
Address	3201 CARDINAL DRIVE, SUITE P-5
City-State-Zip:	VERO BEACH FL 32963

Title	VP
Name	GONZALEZ, ANNE N
Address	498 PALM SPRINGS DRIVE SUITE 100
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	VP
Name	GONZALEZ, ANNE N
Address	498 PALM SPRINGS DRIVE SUITE 100
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JANET L. RIDGWAY**SECRETARY/DIRECTOR****03/23/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date