## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P05000097190

Entity Name: VIERA BUILDERS, INC.

### **Current Principal Place of Business:**

7380 MURRELL ROAD SUITE 202 VIERA, FL 32940

### **Current Mailing Address:**

P.O. BOX 620257 OVIEDO, FL 32762-0257 US

# FEI Number: 20-3123670

### Name and Address of Current Registered Agent:

DECATOR III, JAY A 7380 MURRELL ROAD SUITE 201 VIERA, FL 32940 US FILED Mar 09, 2016 Secretary of State CC9266579766

Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	DVP	Title	VP
Name	WEEKS, JR., PALMER B	Name	DUDA, DAVID J
Address	1200 DUDA TRAIL	Address	1200 DUDA TRAIL
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765
Title	P	Title	AT
Name	JOHNSON, STEPHEN L	Name	MITCHELL, AMY
Address	7380 MURRELL ROAD, SUITE 201	Address	1200 DUDA TRAIL
City-State-Zip:	VIERA FL 32940	City-State-Zip:	OVIEDO FL 32765
Title	DVP	Title	DVPT
Name	CHAPMAN, TRACY D	Name	ENGWALL, MARK E
Address	1200 DUDA TRAIL	Address	1200 DUDA TRAIL
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765
		<b>T</b> :0 -	
Title	VP/COO	Title	VP/AT
Name	MOORE, WILLIAM M	Name	MARTELL, PAUL J JR.
Address	7380 MURRELL ROAD SUITE 202	Address	7380 MURRELL ROAD SUITE 201
City-State-Zip:	VIERA FL 32940	City-State-Zip:	VIERA FL 32940

### Continues on page 2

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: MARK E ENGWALL

VICE PRESIDENT

03/09/2016

Date

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

Title	VP CONSTRUCTION	Title
Name	WRIGHT, CHRIS	Name
Address	7380 MURRELL ROAD SUITE 202	Address
City-State-Zip:	VIERA FL 32940	City-State
Title	AS	Title
Name	GAINEY, ANN M	Name
Address	1200 DUDA TRAIL	Address
City-State-Zip:	OVIEDO FL 32765	City-State
Title	VP SALES AND MARKETING	
Name	MASLINE, MICHELLE	
Address	7380 MURRELL ROAD SUITE 202	

City-State-Zip: VIERA FL 32940

NameDECATOR, JAY A IIIAddress7380 MURRELL ROAD<br/>SUITE 201City-State-Zip:VIERA FL 32940TitleVP OPERATIONSNameLEWIS, TREVORAddress7380 MURRELL ROAD<br/>SUITE 202City-State-Zip:VIERA FL 32940

S