


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

FILED  
Jan 27 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 813313 (4)  
1. Corporation Name  
MODERN HOMES AND EQUIPMENT CO INC

Principal Place of Business 2467 NORTH DOG RIVER MOBILE ALA 36605	Mailing Address 2467 NORTH DOG RIVER MOBILE ALA 36605
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 01/12/1959	Applied For Not Applicable
4. FEI Number 63-0370022	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
DRICKA, ERICK M. 30 S. SPRING STREET P.O. DRAWER 1271 PENSACOLA FL 32596	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	VP
NAME	ELKINS, STEVEN H.
STREET ADDRESS	150 GREENWOOD DR.
CITY - ST - ZIP	DAPHNE AL
<input type="checkbox"/> DELETE	
TITLE	SD
NAME	MCPHILLIPS, S T
STREET ADDRESS	138 EATON SQUARE
CITY - ST - ZIP	MOBILE AL
<input type="checkbox"/> DELETE	
TITLE	D
NAME	MCPHILLIPS JR, H M
STREET ADDRESS	229 MCGREGOR AVE
CITY - ST - ZIP	MOBILE AL
<input type="checkbox"/> DELETE	
TITLE	TD
NAME	FERNANDEZ, L.M.
STREET ADDRESS	6509 SUGAR CREEK PLACE
CITY - ST - ZIP	MOBILE AL
<input type="checkbox"/> DELETE	
TITLE	PD
NAME	MCPHILLIPS, JAMES D
STREET ADDRESS	138 EATON SQUARE
CITY - ST - ZIP	MOBILE AL
<input type="checkbox"/> DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
<input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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.

SIGNATURE:   
JAMES D. MCPHILLIPS

CR2E034 (10/97)