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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **G43105** (7)

1. Corporation Name
PARKE HOMES, INC.

Principal Place of Business	Mailing Address
% JAMES H. SHIMBERG 3550 W. BUSCH BLVD. #145 TAMPA FL 33618-4433 US	% JAMES H. SHIMBERG 3550 W. BUSCH BLVD. #145 TAMPA FL 33618-4433 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/10/1983	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2891533	Applied For <input type="checkbox"/> Not Applicable
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 has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 3550 BUSCHWOOD PARK DR	26 3550 BUSCHWOOD PARK DRIVE
22 Suite, Apt. #, etc. SUITE 145	27 Suite, Apt. #, etc. SUITE 145
23 City & State TAMPA FL	28 City & State TAMPA FL
24 Zip 33618-4435 Country USA	29 Zip 33618-4435 Country USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent					
SHIMBERG, JAMES H. 3550 W. BUSCH BLVD. #145 TAMPA FL 33618-1428	<table border="1"> <tr><td>81 Name</td></tr> <tr><td>82 Street Address (P.O. Box Number is Not Acceptable)</td></tr> <tr><td>83</td></tr> <tr><td>84 City</td></tr> <tr><td>85 Zip Code</td></tr> </table>	81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
81 Name						
82 Street Address (P.O. Box Number is Not Acceptable)						
83						
84 City						
85 Zip Code						

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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	SHIMBERG, JAMES H. 3550 W. BUSCH BLVD. #145 TAMPA FL	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	SHIMBERG, AMY G 10102 WHITE TROUT LN TAMPA FL	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VD	DE ALEJO, ALBERTO A 10111 WOODSONG WAY TAMPA FL	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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)(b), 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 H. Shimberg*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES H. SHIMBERG, President.

03/20/95 (813)
932-1499