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

**PROFIT** CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

BIG BEND MOBILE HOME SALES, INC.

## **FILED** Apr 13 1998 8:00am Secretary of State



							A BIBIR BARIN NTAN
Principal Place of Business Mailing Address					I HORNIN GEOLUNIN HORN OUNE DIN	- 81011 Albii Albii Albii	A BIBIT BAREL (DA)
6048 W. TENNESSEE STREET 6046 W. TENNESSEE ST			STREET				
TALLAHASSEE FL 32304		TALLAHASSEE FL 32304		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	N THIS SPACE	<del></del>
					08/31/1983		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			\		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5 Additional
22		27	1 1		or Solimodo of Clades Position	Fee	Required
City & State		City & State		Election Campaign Financing		00 May Be	
Zip Country		<del></del>	Zip Country		Trust Fund Contribution Added to Fees		
24	25	29	30	· y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current Registered Agent		1001	10. Name and Address of New Registered Agent			
BR	NTTLE, PARK T.		8	1 Name			
	46 W. TENNESSEE STREET		82 Street Add		dress (P.O. Box Number is Not Acceptable	ə)	
TA	LLAHASSEE FL 32304					·	
			Į.e	3			
			8	4 City	<del></del>	B5 Z	Zip Code
44 0		00 d 007 dt 00 Fi t		1		FL <sup>83</sup> <sup>2</sup>	
office or re agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obt	te of Florida. Such change was igations of, Section 607.0505, f	utes, trie abc s authorized Florida Statut	by the corporates.	rporation submits this statement for the puration's board of directors. I hereby accept	the appointment	as registered
SIGNATURE							
<del></del>	Signature, typed or printed name of registered a	igent and title if applicable (NO ND DIRECTORS	DTE: Registered A	gent signature req	ruired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE DC AND DIDECT	TODE IN 12
TITLE	DIFICENS A	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Chan	
NAME	BRITTLE, PARK T		1.2 NAM	1			,
STREET ADDRESS	RT 9 BOX 180			ET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE, FL 00000			-\$1-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Chan	ge Addition
NAME	DAY, ROBERT W.		2.2 NAM	E			
STREET ADDRESS	6522 WOODLAND DR.		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	KEYSTONE HEIGHTS FL			- ST - ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE	S DOTTE DINGLIS IN	☐ DELETE	3.1 TITLE			Chan	ge 🔲 Addition
NAME	BRITTLE, PHYLLIS W. RT.9, BOX 180		3.2 NAM	" i			(
STREET ADDRESS	TALLAHASSEE, FL 00000			ET ADDRESS			
CITY-ST-ZIP TITLE	INLENINOSEE, FL WOOD	DELETE	3.4. CITY 4.1 TITLE	-ST-ZIP		Chan	ge Addition
NAME		- Dittit	4.1 FILE	į.			P C reduces
STREET ADDRESS				ET ADDRESS			J
CITY-ST-ZIP			4.4 CITY				į
TITLE		☐ DELETE	5.1 TITLE		·	Chang	ge Addition
NAME			5.2 NAM	ε			
STREET ADDRESS			5.3 STRE	ET ADORESS			
CITY-ST-ZIP		·	5.4 CITY	- ST-ZIP			i
TITLE		DELETE 6.1				☐ Chan	ge Addition
NAME			62 NAM	•			ŀ
STREET ADDRESS				et address			
MTV 61.710			E 4 CITY	CT 71D			

14. Thereby 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 trulled empowered to secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or or an attainment with undergonal true of the corporation of the corporation of the receiver of trulled empowered to secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or or an attainment with undergonal true of the corporation of the corpora

SIGNATURE: