


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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H39458 (5)

1. Corporation Name
MID-FLORIDA BUILDERS, INC.

Principal Place of Business 6 ALGIERS AVENUE WINTER SPRINGS FL 32708 US	Mailing Address 1760 CINNAMON CIRCLE CASSELBERRY FL 32707 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 01/23/1985
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2471107
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24. Country	29. Country	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 CHARLES E KELLEY, SR 6 ALGIERS AVE WINTER SPRINGS FL 32708 <i>OK # 5553</i>	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	NAME KELLEY, CHARLES E., JR.	1.1 TITLE PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1760 CINNAMON CIR	<input checked="" type="checkbox"/> DELETE	1.2 NAME KELLEY, JANICE A	
CITY-ST-ZIP CASSELBERRY FL	<i>Remove</i>	1.3 STREET ADDRESS 1760 CINNAMON CIR	
		1.4 CITY-ST-ZIP CASSELBERRY, FL 32707	
TITLE CEO	NAME KELLEY, CHARLES E SR	2.1 TITLE SEC/PRES.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 6 ALGIERS AVE	<input type="checkbox"/> DELETE	2.2 NAME KELLEY, ALISA K.	
CITY-ST-ZIP WINTER SPGS FL		2.3 STREET ADDRESS 1760 CINNAMON CIR	
		2.4 CITY-ST-ZIP CASSEL BERRY FL- 32707	
TITLE D	NAME KELLEY, JANICE A	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1760 CINNAMON CIR	<input type="checkbox"/> DELETE	3.2 NAME	
CITY-ST-ZIP CASSELBERRY FL	<i>(Move)</i>	3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: _____ *1/19/98* **407-327-1290**

CR2E034 (10/97)