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

CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000004722 (1)

Country

MOBILE HOME RESALE MARKETING, INC. Principal Place of Business Mailing Address 1900A HAVENDALE BLVD. SR 544 1900A HAVENDALE BLVD. SR 544 WINTER HAVEN FL 33881 WINTER HAVEN FL 33881

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Mailing Address

Suite, Apt. #, etc.

City & State

FILED Apr 08 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified

8. This corporation owes or has paid the current year Intaggible

☐ Yes

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

01/19/1995

59-3290378

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

B, resilie and recorded or derivate regions region.				10. 11	
DREIBELBIS, WILLIAM H		81	81 Name		
1900A HAVENDALE BLVD, SR 544 WINTER HAVEN FL 33881			82 Street Address (P.O. Box Number is Not Acceptable)		
MINICH HAVEN PL 50001		83			
		84	City	85 Zip Code	
			Oity	FL S Z S C C C C C C C C C	
11. Pursuant to the provisions of Soctions 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					
		logislored Agent signature required when reinstating) DATE			
12.		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	101	1.1 TITLE		C. Cusufis C. Mornion	
NAME	preperso, menument	1.2 NAME			
STREET ADDRESS	100011111111111111111111111111111111111	1.3 STREET ADDRESS		ļ	
CITY-ST-ZIP		1.4 CITY-ST-ZIP			
TITLE	DELETE.	2.1 TITLE		☐ Change ☐ Addition	
NAME				ţ-	
STREET ADDRESS	REET ADDRESS		ADDRESS	· ·	
CITY-ST-ZIP			T-ZIP		
TITLE	□ DELETE	3.1 TITLE		Change Addition	
HAME		3.2 NAME			
STREET ADDRESS		3 3 STREET			
CITY-ST-ZIP		3.4. CITY - ST - ZI			
TITLE	DELETE .	4.1 TITLE		Change Addition	
NAME	4			•	
STREET ADDRESS	}·	1.3 STREET	ADDRESS	i ·	
CITY-ST-ZIP		1.4 CITY-S	T-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET	address		
CITY-ST-ZIP			T-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition	
NAME		6.2 NAME			
STREET ADDRESS	į į	5.3 STREET	ADDRESS		
CITY-ST-ZIP		6.4 CITY-S			
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 13 if changed, or on an attachment with an address.					
Block 12 of Block 13 in changed, or on an attachment with an address.					

WILLIAM H DREIBELBIS

Country