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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1998 8:00am

Secretary of State

513-449-1476

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000059775 (3)

ADAMS AMERICAN HOME CORPORATION

Principal Place of Business Mailing Address 221 TURNER STREET 221 TURNER STREET **CLEARWATER FL 34616** CLEARWATER FL 34616 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/28/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 26 59-3338470 Not Applicable Suite, Apt. #. etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country This corporation owes or has paid the current year Intengible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LITTLE, THOMAS C 2123 NE COACHMAN ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 **CLEARWATER FL 34625** 84 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 ported name of registered agent and to clit applicable (NOTE: Registered Agent signature required when reinstating) 10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1 1 TITLE MARIA SCIPIONE ADAMS, ROBERT C. NAME 1.2 NAME 221 TURNER ST. 221 TURNER STREET ADDRESS 1.3 STREET ADDRESS 337S6 **CLEARWATER FL** clearwater, Fl CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE WEBER, GEOFFREY L. STREET ADDRESS 221 TURNER ST. 2.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE __ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 62 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 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 eath; that I am an officer or director of the corporation of the recent in or poster 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 prain flactures with an address.

GEOFFREN CWOSL