SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthem

Secretary of State DIVISION OF CORPORATIONS

1998 P97000061998 (5)

AVANTI HOMES, INC.

FILED Aug 14 1998 8:00am Secretary of State



		Malling Address		
Principal Place of Business				
182 SARATOGA BLVD EAST		ROYAL PALM BEACH FL 33411		DO NOT WRITE IN THIS SPACE
ROYAL PALM BEACH FL 33411		1101712		3. Date Incorporated or Qualified
ļ				07/16/1997 Applied For Applied
2a. Malling Address			idoga bluo	E 65-0778340 Not Applicable
2. Principal Place of Business and SUDE 26 218 Sara			dust how	\$8.75 Additional
21 218 SaratogA DIVDE 26 CID Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required
Sulle, Apl. #, etc.			Beach 71	6. Election Campaign Financing \$5.00 May Be
23 Royal faim Beach 28 Koyal Palmbeach			seach Ti	' Trust Fund Contribution Added to Fees
Zip 22111 Coyntry Coyntry Coyntry Coyntry Coyntry 8. This corporation owes or has paid the current year Intangible				
24 1. 33411 25 Falm Beach 29 33411 3 Palm Beach Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
CROCETTA, LAURIE 81 Name				
-14115-ORANGE-BLVD				Address 4D C. Day Niverbas in Med Accountships
LOXAHATCHEE FL 33470			82 Street	Address (P.O. Box Number is Not Acceptable)
EDANIATOREE PL 33470			83	0 000 000 000
				0 0
]	×		84 60	In for loss Code ,
Poyacia m Deh FL B3411				
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	Signature, typed or printed name of registered agent	and title if applicable (NO)	TE: Registered Agent signatu	rre required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	CROCETTA, LAURIE		1.2 NAME	
STREET ADDRESS	14115 ORANGE BLVD		1.3 STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		1.4 CITY-ST-ZIP	<u> </u>
TITLE	D	DELETE	2.1 TITLE	Change Addition
1 .	T .	N.Z. DELE IE	2.2 NAME	ANN Demanna Change Addition
NAME	DEMANNA, RONALD JR		1	Aloro Derream -
STREET ADDRESS	14115 ORANGE BLVD		2.3 STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		2.4 CITY-ST-ZIP	
TITLE	D ?	DELETE	3.1 TITLE	Change Addition
NAME	LOMONACO, REBECCA		3.2 NAME	
STREET ADDRESS	14115 ORANGE BLVD		3.3 STREET ADDRESS	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	C. Silvingo C. Silvingo
1 "				
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME		_ ا مددد اد	6.2 NAME	70000261813r-020 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15
i '				-08/17/9801137028 ₩
STREET ADDRESS			6.3 STREET ADDRESS	***550 00
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 army strong or supplemental applied and is true and accurate and that my signature shall have the same lead office as if made under on the lam.				

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 Blook 13 if changes or on an attachment with an address.