

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 MAY 17 AM 10:20

STATE OF FLORIDA
 TALLAHASSEE

DOCUMENT # **P980000 77174**

1. Corporation Name

Wakulla Custom Homes, Inc

Principal Place of Business

Mailing Address

**3295 Main St.
 Crawfordville, Fl, 32327**

**78 Windsong Cir. N
 Crawfordville, Fl
 32327**

2. Principal Place of Business

2a. Mailing Address

21 **Suite 1**
 Suite, Apt #, etc.
 22 **Crawfordville, Fl**
 City & State

26 **78 Windsong Cir. N.**
 Suite, Apt #, etc.
 27 **Crawfordville, Fl.**
 City & State

23 Zip **32327** Country **Wakulla**

28 Zip **32327** Country **Wakulla**

9. Name and Address of Current Registered Agent

**John C. Jay
 78 Windsong Cir. N.
 Crawfordville, Fl. 32327**

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

John C. Jay *John C. Jay*

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when re-registering)

5/12/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
 NAME **President John C. Jay**
 STREET ADDRESS **78 windsong cir N.**
 CITY-ST-ZIP **Crawfordville, Fl 32327**

TITLE DELETE
 NAME **V. President Jeffrey A. Underwood**
 STREET ADDRESS **58 windsong Cir.**
 CITY-ST-ZIP **Crawfordville Fl 32327**

TITLE DELETE
 NAME **Sec Stephen B. Porter**
 STREET ADDRESS **235 Roddenberry Sink Rd.**
 CITY-ST-ZIP **Crawfordville Fl 32327**

TITLE DELETE
 NAME
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13.

11 TITLE
 12 NAME
 13 STREET ADDRESS
 14 CITY-ST-ZIP
 21 TITLE
 22 NAME
 23 STREET ADDRESS
 24 CITY-ST-ZIP
 31 TITLE
 32 NAME
 33 STREET ADDRESS
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 42 NAME
 43 STREET ADDRESS
 44 CITY-ST-ZIP
 51 TITLE
 52 NAME
 53 STREET ADDRESS
 54 CITY-ST-ZIP
 61 TITLE
 62 NAME
 63 STREET ADDRESS
 64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

9900002892359--8
 -05/02/99--01044--004
 ****150.00 ****150.00

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, with all other like empowered.

SIGNATURE: *John C. Jay* *John C. Jay*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/99

(850) 508-0910
 DAYTON PHONE #

CR2E034 (11/98)