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FILED

May 06 1997 8:00am  
Secretary of State

PROFIT\*  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 659087 (1)  
1. Corporation Name  
HOMESTEAD STUDIO, INC.

Principal Place of Business  
7081 OLD KINGS RD S #47  
C/O RICK GRANT  
JACKSONVILLE FL 32217-2914

Mailing Address  
7081 OLD KINGS RD S #47  
C/O RICK GRANT  
JACKSONVILLE FL 32217-2914



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified  
03/12/1980

3a. Date of Last Report  
05/01/1996

4. FEI Number

59-2097207

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

GRANT, RICHARD M  
7081 OLD KINGS RD S #47  
JACKSONVILLE FL 32217-2914

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

Signature, typed or printed name of registered agent and title (Applicable)

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

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
LEBO, ELAINE  
7081 OLD KINGS RD S #47  
JACKSONVILLE FL 32217-2914

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
GRANT, RICHARD M.  
7081 OLD KINGS RD S #47  
JACKSONVILLE FL 32217-2914

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 attached copy with an address.

SIGNATURE: [Signature] (904) 730-7689

CR2E034 (9/96)