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

NAME

STREET ADDRESS

SIGNATURE:

FILED May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State ANNUAL REPORT Secretary of State . 1998 DIVISION OF CORPORATIONS DOCUMENT # 281120 (6)LAKE HAVEN MOBILE SALES. INC. Principal Place of Business Mailing Address 1415 MAIN ST., #501 1415 MAIN ST., #501 DUNEDIN FL 34698 **DUNEDIN FL 34698** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/05/1964 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 26 59-1050718 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCDANIEL, JAMES E 1415 MAIN ST., #501 Street Address (P.O. Box Number is Not Acceptable) **DUNEDIN FL 34698** 63 City Zip Code 65 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 if applicable (NOTE: Registered Agent signature required when reinstating) 10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change ___ Addition MCDANIEL, JAMES E. NAME 1.2 NAME CR2E034 **501 LAKE HAVEN PARK** STREET ADDRESS 1.3 STREET ADDRESS **DUNEDIN FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP Change TITLE DELETE 2.1 TITLE Addition NAME MCDANIEL, JAMES E 2.2 NAME **501 LAKE HAVEN PARK** STREET ADDRESS 2.3 STREET ADDRESS DUNEDIN, FL 00000 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MCDANIEL, JAMES E. NAME 3.2 NAME **501 LAKE HAVEN PARK** STREET ADDRESS 3.3 STREET ADDRESS **DUNEDIN FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CITY- ST-ZIP CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing does not qualify fer 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 acciver or truetee 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 op an attachings with an address.