

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

FILED
Mar 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 300134 (4)
1. Corporation Name
JEFFREY HOMES, INC.



Principal Place of Business 1308 N. KINGSWAY ROAD P. O. BOX 649 BRANDON FL 33510-2516	Mailing Address 1308 N. KINGSWAY ROAD P. O. BOX 649 BRANDON FL 33509-0649
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/23/1965	3a. Date of Last Report 04/16/1996
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 59-1157089	Applied For Not Applicable
22 City & State	27	28 City & State	29	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

SEFCIK, WILLIAM T.
510 E. WINDHORST ROAD
BRANDON FL 33510

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	V
NAME	SEFCIK, WILLIAM T.	1.2 NAME	
STREET ADDRESS	510 E. WINDHORST ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	1.4 CITY-ST-ZIP	
TITLE	DST	2.1 TITLE	
NAME	SEFCIK, KAY J.	2.2 NAME	
STREET ADDRESS	510 E. WINDHORST ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	
NAME	JEFFREY, AGNES J.	3.2 NAME	
STREET ADDRESS	502 E. WINDHORST ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	SEFCIK, WILLIAM J.	4.2 NAME	
STREET ADDRESS	502 E. WINDHORST RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	P
NAME	SEFCIK, BRIAN S	5.2 NAME	
STREET ADDRESS	2801 COMMONWEALTH AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 attachment with an address.

SIGNATURE:

[Handwritten Signature]

[Handwritten Signature]

[Handwritten Signature]

CR2E034 (9/96)