

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

FILED

Feb 04 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 # 503508 (4)
 1. Corporation Name
WEBB BUILDERS, INC.

Principal Place of Business 13896 U.S. HIGHWAY #1 JUNO BEACH FL 33408	Mailing Address 13896 U.S. HIGHWAY #1 JUNO BEACH FL 33408-1607
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/18/1976		3a. Date of Last Report 02/20/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-1668823		Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		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				10. Name and Address of New Registered Agent			
WEBB, IVAN RANDALL 17716 BRIDLE CT JUPITER FL 33478				B1 Name (Same)			
				B2 Street Address (P.O. Box Number is Not Acceptable) 31 RIVER DRIVE			
				B3			
				B4 City TEQUESTA FL B5 Zip Code 33469			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBB, LINDA J	1.2 NAME	
STREET ADDRESS	17716 BRIDLE CT	1.3 STREET ADDRESS	31 River Drive
CITY-ST-ZIP	JUPITER, FL 00000	1.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	ST <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALTERS, IRENE E	2.2 NAME	
STREET ADDRESS	24 PINE TREE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA, FL 00000	2.4 CITY-ST-ZIP	zip code: 33469
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBB, IVAN RANDALL	3.2 NAME	
STREET ADDRESS	17716 BRIDLE CT	3.3 STREET ADDRESS	31 River Drive
CITY-ST-ZIP	JUPITER, FL 00000	3.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPBELL, DANIEL C.	4.2 NAME	
STREET ADDRESS	530 MARLIN RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BCH. FL	4.4 CITY-ST-ZIP	zip code: 33408
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  **IVAN RANDALL WEBB** 1-22-97 561/626-1568
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

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