

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 518362 (9)
1. Corporation Name
REAL ESTATE ONE, INC.

Principal Place of Business
1200 W HIGHWAY 434
SUITE 100
LONGWOOD FL 32750
US

Mailing Address
1200 W HIGHWAY 434
SUITE 100
LONGWOOD FL 32750
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/12/1976	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1714867	
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	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PULTE T J 1200 W. HIGHWAY 434 STE 100 LONGWOOD FL 32750		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELSEA, RICHARD S	1.2 NAME	
STREET ADDRESS	30043 FOX RUN	1.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM MI	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELSEA, RICHARD S	2.2 NAME	
STREET ADDRESS	30043 FOX RUN	2.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM MI	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELDAY, DONALD F.	3.2 NAME	
STREET ADDRESS	41822 SYCAMORE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NOVI MI	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENHOLM, DOUGLAS M	4.2 NAME	
STREET ADDRESS	7315 LINDENMERE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM MI	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSON, LAUREL L	5.2 NAME	
STREET ADDRESS	34556 RAMBLE HILLS DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	FARMINGTON HILLS MI	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PULTE, T. J.	6.2 NAME	
STREET ADDRESS	3323 S ST. LUCIE DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CASSELBERRY FL	6.4 CITY-ST-ZIP	

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.

SIGNATURE:  DOUGLAS M. DENHOLM 4-27-98 (248) 851-2600

CR2E034 (10/97)