FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 543429

(5)

MODE	RN HOMES OF MARTIN CO	DUNTY, INC.		A EBBIRA BANK BIRBO AUKH BANKO ALDIK	I KARLANDIN DIBUK DIBUK BIBUK BIBUK BIBUK BIBUK
Principal Plac	e of Business	Mailing Address			
7250 S.E. FEDERAL HIGHWAY HOBE SOUND FL 33455-5851 HOBE SOUND FL 33455-5851			NAY		
				3. Date Incorporated or Qualified 08/19/1977	3a. Date of Last Report 05/01/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1770447	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	e	City & State	····		Fee Required
23	_	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for	Added to Fees
24	25	29	30		: No
1	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	Registered Agent
			81 Name		
KEATHLEY, TERRY M			82 Street Addr	ess (P.O. Box Number is Not Acceptab	ole)
7250 SE FEDERAL HIGHWAY		LL			
HOBE \$	OUND FL 33455		83		
			84 City		■■ 85 Zip Code
11. Pursuant or register familiar wi	to the provisions of Sections 607.0502 red agent, or both, in the State of Flori th, and accept the obligations of, Sect	2 and 607.1508, Florida Statuter da Such change was authorize tion 607.0505. Florida Statutes	s, the above named corpora d by the corporation's boar	ation submits this statement for the pur d of directors. I hereby accept the appr	pose of changing its registered office ointment as registered agent. I am
SIGNATURE					
	Signature, typed or printed hance of registered agent		Registered Agent signature required		DATE
12.		D DIFECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
NAME	T BOBO, GERALD W	☐ DELETE	1 1 THILE		Change Addition
STREET ADDRESS	8 BAY HARBOR RD		1.2 NAME		
CITY-ST-ZIP	TEQUESTA, FLORIDA 00000		1.3 STREET ADDRESS		
TITLE	P	↑ DELETE	1.4 CITY - S1 - ZIP 2. 1 TITLE		
NAME	KEATHLEY, TERRY M		2.2 NAME		Change Addition
STREET ADDRESS	7250 SE FEDERAL HWY.		2.3 STREET ADDRESS		İ
CITY-ST-ZIP	HOBE SOUND FL		24 CITY-ST-ZIP		
TITLE	٧	DELETE	3 1 THLE		Change Addition
NAME	KEATHLEY, HAROLD L		3.2 NAME		
STREE1 ADDRESS	106 ATLANTIC RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	NO PALM BCH, FL 00000		3 4 CITY - ST - ZIP		
TITLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME.		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP			4 4 CITY - ST - ZIP		
TITLE		DELETE	5. 1 THE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S1 - ZIP		
NAME		FT Derrie	6 1 TITLE		Change Addition
STREET ADDRESS			6 2 NAME		1
CITY-ST-ZIP			6.3 STHEET ADDRESS 6.4 City-St-7ip		
			0.4 0111 - 31 - ZIF		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this arrival 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: _

SIGNATURE AND VEPTO OR PRINTEE! NAME OF SIGNING OFFICER OR OR OLD OF SIGNING OFFICER OR OR OLD OF SIGNING OFFICER OR OFFICER OR OLD OF SIGNING OFFICER OR OLD OFFICER OFFICER OR OLD OFFICER OFFICER OFFICER OFFI

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