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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 591490

(8)

DE SOTO MOBILE HOME SALES, INC.

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**FILED** 

May 14 1997 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Address			<del></del>				
6221 14TH ST BRADENTON F		6221 14TH ST 2 #210 BRADENTON FL 34207-46	6221 14TH ST 2 #210 BRADENTON FL 34207-4612						
						3. Date incorporated or Qualified 10/27/1978		ate of Last F 25/1996	Report
· ·	lace of Business	2a. Mailing Address	<del></del>			4. FEI Number	<del>-1</del>	<u> </u>	pplied For
Suite, Apt.	# atc	26				59-1975666			lot Applicable Additional
22		27				5. Certificate of Status Desired		<b>+</b> - · · · -	Auditional lequired
City & Stat	е	City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Ζφ <b>24</b>	Country 25	Zip 29	30 Cou	ntry	····		Yes [	□ No	s. 199.032,
040	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered	Agent	
	ITER, SAUL TE 210 BAYSHORE OFFICE BLD	G	-						
	6221 14TH ST. W.			82	Street Add:	ress (P.O. Box Number is Not Acceptab	le)		
BRA	DENTON FL 34207			83					
•				84	City			<b>85</b> Zip	Code
44 Dureuppt	to the provisions of Sections 607 050	22 and 607 1509 Llorida Statu	too the o	2011		paration submits this statement for the s	FL		ite registered
office or a	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida Such change was ations of Section 607 0505. I	authorized Iorida Stat	d by	y the corpora	poration submits this statement for the patients board of directors. I hereby acception's board of directors is the properties of the prop	of the app	pointment as	s registered
SIGNATURE	- Lander of the control of the contr								
10	Signature, typed or printed name of registered age	ent and title if applicable (NO D DIRECTORS	TE: Registeror	i Aga	ent signature requi	red when reinstaling)	DATE EDO ANIE	DIRECTO	DC IN 10
12.	PD OFFICERS AN	DELETE	1.1 10	ILE.		ADDITIONS/CHANGES TO OFFIC	CHS AINL	Change	
NAME	PASTER, SAUL	<del></del>	1.2 NA					- J	<del></del>
STREET ADDRESS	BAYSHORE OFFICE BLDG.		1.3 \$1	REE1	ADORESS				
CITY-ST-ZIP	BRADENTON FL				S1 - ZIP				<del></del>
TITLE	DEDDEAULT GEODGE	☐ DELETE	2.1 TF					Change	Addition
NAME	PERREAULT, GEORGE 6221 14TH ST W		2.2 NA						
STREET ADDRESS CITY-ST-ZIP	BRADENTON FL				ADDRESS S1-7IP				
TITLE		DELETE	3111		31-717			Change	Addition
NAME		-	3.2 NA					<b>•</b>	
STREET ADDRESS			3.3 \$1	REET	ADDRESS				
CITY-ST-ZIP			3.4 C	ITY-5	S1-7IP				
TITLE		DELETE	4 1 TI	HE				Change	Addition
NAME			4 2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5 1 11		ST - ZIP		···································	Change	Addition
NAME					}			Grange	Manuali
STREET ADDRESS			52 N/ 53 S1		LADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		DELETE	G.1 TI		****			Change	Addition
NAME		<u> </u>	6.2 N/						
STREET ADDRESS					I ADDRESS				
CITY-ST-ZIP			- 1		S1 - <b>Ž</b> (P				
<del></del>		To the second second				11 0 11 440 00/00/00 51 14 0/11			777

I do hereby certify that the information supplied with this filling information indicated on this annual report or supplemental an Lam an officer or director of the corporation or the resolver appears in Block 12 or Block 13 in Jagged, or on an asserting locs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the value report is true and accurate and that my signature shall have the same logal effect as if made under oath; that ustee empowered by effect this report as required by Chapter 607, Florida Statutes; and that my name

941-758~4389