


FILE NOVEMBER 15 FEE AFTER MAY 1 IS \$550.00

FILED
Feb 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 654244
1. Corporation Name
Unique Homes of America

Principal Place of Business Mailing Address
**7515 Park Springs Circle
Orlando, FL. 32835 (SAME)**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 1/31/80	3a. Date of Last Report 1/15/96
21	State Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2782127	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**JULIAN M. DUANE
7515 Park Springs Circle
Orlando, FL. 32835**

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

11. Pursuant to the provisions of Sections 607.012 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 *M. Duane* **M. DUANE JULIAN, PRESIDENT** DATE **1/13/97**

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	JULIAN M. DUANE	
STREET ADDRESS	7515 Park Springs Circle	
CITY, ST, ZIP	ORLANDO, FL. 32835	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	JULIAN DEBRA A.	
STREET ADDRESS	7515 Park Springs Circle	
CITY, ST, ZIP	Orlando, FL. 32835	<input checked="" type="checkbox"/> DELETE
TITLE	ST	<input type="checkbox"/> DELETE
NAME	BURNS MARIAN G	
STREET ADDRESS	1334 Kurume Court	
CITY, ST, ZIP	Orlando, FL. 32819	<input type="checkbox"/> DELETE
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	VST JULIAN DEBRA A.
23 STREET ADDRESS	7515 Park Springs Circle
24 CITY-ST-ZIP	Orlando, FL. 32835
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	600002100638
63 STREET ADDRESS	-02/28/97--01005--007
64 CITY-ST-ZIP	***165.00

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 reported 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: *M. Duane* **M. Duane Julian** 1/13/97 (407)295-5336

CR2E034 (9/96)