SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
1995 JUL 20 AM 10:18
TALLAHASSEE, FLORIDA

DOCUMENT # F85344 (2)

1. Corporation Name

HYATT HOMES, INC.

Principal Place of Business	Mailing Address
4824 NE 23RD AVENUE STE. 10 FT.LAUDERDALE FL 33308	4824 NE 23RD AVENUE STE. 10 FT.LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 / Suite, Apt #, etc.: 22 / City & State: 23 / Zip: 24 / Country: 25

2a. Mailing Address: 26 / Suite, Apt. #, etc.: 27 / City & State: 28 / Zip: 29 / Country: 30

3. Date Incorporated or Qualified: 06/15/1982

3a. Date of Last Report: 05/13/1994

4. FEI Number: 59-2230498 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

EDMUNDS, RALSTON P.
6 WINNEBAGO RD.
SEA RANCH LAKES FL 33308

10. Name and Address of New Registered Agent

81 Name: Denise B. Edmunds
82 Street Address (P.O. Box Number is Not Acceptable): 6 Winnebago Road
83 @ Sea Ranch Lakes
84 City: Fort Lauderdale FL 85 Zip Code: 33308

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: Denise B Edmunds DATE: 7/12/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	EVANS, J. COLIN
STREET ADDRESS	4824 NE 23RD AVE, #12
CITY ST ZIP	FT. LAUDERDALE FL
TITLE	S
NAME	EDMUNDS, RALSTON P.
STREET ADDRESS	6 WINNEBAGO RD.
CITY ST ZIP	SEA RANCH LAKES FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President	☒ Change ☐ Addition
12 NAME	Denise B. Edmunds	
13 STREET ADDRESS	6 Winnebago Rd	
14 CITY ST ZIP	Ft. Lauderdale, FL 33308	
21 TITLE	VP	☒ Change ☐ Addition
22 NAME	Elise Gendron	
23 STREET ADDRESS	4824 NE 23rd Av. #10	
24 CITY ST ZIP	Ft Lauderdale, FL 33308	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

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 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: Denise B Edmunds — 7/12/95 (305) 942-5124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Denise B. Edmunds

CR2E034 (3/95)

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