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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500003999 (8)

SWEETWATER HOMES OF GEORGIA, INC.

FILED May 13 1998 8:00am Secretary of State



					I (###############################
Principal Place of Business Mailing Address					
309 E 4TH ST 309 E 4TH ST OCILLA GA 31774					
OCILLA GA	31774	OUILLA GA 31774			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					08/18/1995
2. Principal Place of Business 2a. Mailing Add			S\$		4. FEI Number Applied For
21		26			62-1595624 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Certificate of Status Desired Secretary Secreta
City & State City		City & State	City & State		Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	У	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	it Hegistereo Agent	В	Name	10. Name and Address of New Registered Agent
	T CORPORATION SYSTEM		*	Name	le l
1200 SOUTH PINE ISLAND ROAD			8:	2 Street	et Address (P.O. Box Number is Not Acceptable)
PL	ANTATION FL 33324		8:	<u> </u>	
			8	<u> </u>	ler Tip Code
			6	City	FL 85 Zip Code
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					
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable (NOTE	Registered A	gent signature	ure required when reinstaling) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DCP	DELETÉ	1.1 TITLE		EXEC. V.P. FINANCE Change Haddition
NAME	WILLIAMS, JACKIE		1.2 NAME		NANCY F. YEAGER 3096 4+4 ST.
STREET ADDRESS			1.3 STREE	T ADDRESS	\$ 3096 4 TO ST.
CITY-ST-ZIP	OCILLA GA 31774		1.4 CITY-	ST-ZIP	OCILLA, GA. 31774
TITLE	DST DOWN	DELETE	2.1 TITLE		Change Addition
NAME	WILLIAMS, RONALD		2.2 NAME		
STREET ADDRESS				T ADDRESS	\$
CITY-ST-ZIP	CHARLOTTE NC 28211		2.4 CITY	-ST-ZiP	
TITLE	D SCOTT SAM	☐ DÉLETE	3 1 TITLE		☐ Change ☐ Addition
NAME	440E N DEVEDOANO		3.2 NAME		_
STREET ADDRESS	DI ACCOURAD CA 04542			T ADDRESS	8
CITY-ST-ZIP	DENOMBLAN GA 31310	DELETE	3.4. CITY	-S1-ZIP	Change Addition
TITLE		☐ ocrtit	4.1 TITLE 4. 2 NAM	:	Change Li Adulton
NAME ETREET ADDRESS					,)
STREET ADDRESS				T ADDRESS	5
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE	ST-ZIP	Change Addition
TITLE		LJ DELLIE			C onange C Addition
NAME CTREET ADDRESS			5.2 NAME		<u> </u>
STREET ADDRESS				T ADDRESS	s
CITY-ST-ZIP TITLE	 	DELETE	5.4 CITY- 6.1 TITLE	51-ZIP	Change Addition
NAME		C) precie	6.2 NAME		Change Addition
					. 1
STREET ADDRESS				T ADDRESS	>
CITY-ST-ZIP	1		6.4 CITY-	S1 - ZIP	1

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 suppliemental 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 ctranged, or on an attachment with an address.

CIONATURE, Marcut, 4

1 - Naucy F Vincin

1/ 27 98 /01/11/02/11