

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995**FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # G61056****(9)**

1. Corporation Name

FORTUNE HOMES, INC.**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS****95 APR -6 AM 9:20**

Principal Place of Business

**5016 27TH ST SW
P.O. BOX 081291
FT. MYERS FL 33906**

Mailing Address

**P.O. BOX 61291
5016 27TH STREET SW
FT. MYERS FL 33906-1291
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/26/1983

3a. Date of Last Report

03/15/1994

4. FEI Number

59-2334335

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24**25**

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29**30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MATENA, LILIAN SY
5016 27TH ST SW
FT. MYERS FL 33904**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. 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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	MATENA, WALTER	5016 27TH ST SW	LEHIGH FL
STV	MATENA, LILIAN SY	5016 27TH ST SW	LEHIGH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 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 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Lillian Sy Matena**MARCH 17, 1995****813-3693151**