PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G63610

(1)

MERRIGK HOMES, INC.

REMOTATEMENT 97-98

Principal Place of Business

1491 NW 21ST ST. FT. LAUDERDALE FL 33311 Mailing Address

1491 NW 21ST ST.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA



FT. LAUDERDALE FL 33311		FT. LAUDERDALE FL 33311-3521			
!				3. Date Incorporated or Qualified 10/04/1983	3a. Date of Last Report 03/19/1996
1	Place of Business	2a. Mailing Address	7 - 1 - 1 - 1	4. FEI Number	Applied For
	RICK HOMES IN	26 () (XX 542	3 59-2327252	Not Applicable
Suite, Apt		Suite, Apt #, etc.	•	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Star	1 and code la	City & State	adogaly la	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip 1-1-14	Country	Trust Fund Contribution 8. This corporation has liability for its contribution.	
24 33		.	30	Florida Statutes Yes No	
110	9. Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
MCBEAN, VAUDINE 11810 NW 30TH PLACE SUNRISE FL 33323				dress (P.O. Box Number is Not Acceptable No. W. 35th	Bean Ol
			84 City	LAZIRALI	FL 85 Zip Code 3.33 3.23
11. Pursuant office or ragent. La	to the provisions of Sections 607,0502 registered agent, or both, in the State of am familiar, with, and accept the obligation	Florida. Such change was au ons of, Section 607.0505, Flor	s, the above-named control thorized by the corporate Statutes.	rporation submits this statement for the pation's board of directors. I hereby accept	urnose of changing its registered
SIGNATURE	Signature, typed or printed harne of registered agent in	III- () OMN	Registered Agent signature regi		DATE
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PO	☐ DELETE	1.1 TITLE		Change Addition
NAME	MCBEAN, VAUDINE		1.2 NAME		·
STREET ADDRESS	11810 NW 30TH PLACE		1.3 STREET ADDRESS	9000024	61459-7 3801003020
CITY-ST-ZIP	SUNRISE FL 33323		1.4 CITY-ST-ZIP	-03/19/	3801003020 -
TITLE		☐ DELETE	2.1 TITLE	****气门	3.00 ******50 Addition
NAME			2.2 NAME		
OTREET ADDRESS	}		2.3 STREET ADDRESS	, 9 000024	61450 >
CITY-ST-ZIP			2 4 CITY - ST - ZIP	\$. (= = = -	
TIFLE		☐ DELETE	3.1 TITLE		98DIDGG ge DE Addition
name			3.2 NAME	****40	3,75 ****408.75
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CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		The percent	4.1 THEE		Change Abbition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY-ST-ZIP	·	-
TITLE		DELETÉ	5.1 TITLE	4	7 Change Addition
NAME			5.2 NAME	a. alar	
STREET ADDRESS	•		5.3 STREET ADDRESS	11.00111.10	IX
CITY-ST-ZIP			5.4 CITY - ST - ZIP	~ 31(Q)	t^{r}
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I do hereby certify that the information supplied with this filling 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 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.

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