FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAR 15 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G73743 (8)

1. Corporation Name
LEDMAN HOMES, INC.

Principal Place of Business	Mailing Address
1408 TROUT DR. BAY POINT BOX 27267 PANAMA CITY BCH. FL 32411	1408 TROUT DR. BAY POINT BOX 27267 PANAMA CITY BCH. FL 32411

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/14/1983
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business
21: 104 GOLF DRIVE
22 Suite, Apt. #, etc.: PO BOX 27267
23 City & State: PANAMA CITY BEACH, FL
24 Zip: 32411
25 Country: USA

2a. Mailing Address
26: 104 GOLF DRIVE
27 Suite, Apt. #, etc.: PO BOX 27267
28 City & State: PANAMA CITY BEACH, FL
29 Zip: 32411
30 Country: USA

4. FEI Number: 59-2369718 ☐ 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

LEDMAN, WILBUR T.
1408 TROUT DR.
PANAMA CITY BCH. FL 32411

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 104 GOLF DRIVE
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☒ Change ☐ Addition
NAME	LEDMAN, WILBUR T	1.2 NAME		
STREET ADDRESS	1408 TROUT DR	1.3 STREET ADDRESS	104 GOLF DRIVE	
CITY-ST-ZIP	PANAMA CITY BCH FL	1.4 CITY-ST-ZIP	PANAMA CITY BEACH, FL 32411	
TITLE	STD	2.1 TITLE	VSTD	☒ Change ☐ Addition
NAME	LEDMAN, MELANIE A.	2.2 NAME		
STREET ADDRESS	1408 TROUT DR.	2.3 STREET ADDRESS	104 GOLF DRIVE	
CITY-ST-ZIP	PANAMA CITY BCH. FL	2.4 CITY-ST-ZIP	PANAMA CITY BEACH, FL 32411	
TITLE	VD	3.1 TITLE		☒ Change ☐ Addition
NAME	LEDMAN, THOMAS W	3.2 NAME	DELETE	
STREET ADDRESS	1408 TROUT DRIVE	3.3. STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH FL	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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 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.

SIGNATURE: Wilbur T. Ledman WILBUR T. LEDMAN, PRESIDENT 3/11/95 904-235-2235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0410684 FP