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

PRÔFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 **DOCUMENT # H11294** (6)FLORIDA HOMES AND LAND INCORPORATED OF VOLUSIA C OUNTY Principal Place of Business Mailing Address 506 N RIDGEWOOD AVE 204 N RIVERSIDE DR EDGEWATER FL 82132 **EDGEWATER FL 32132** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/05/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2428161 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 $Z_{\rm ID}$ Country Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes 24 25 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HAUGHWOUT, LESLIE C 204 N RIVERSIDE DR Street Address (P.O. Box Number is Not Acceptable) 82 EDGEWATER FL 32132 83 R4 City Zip Code 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 em familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signatore, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE TITLE Change Addition HAUGHWOUT, C. LESLIE NAME 1.2 NAME CR2E034 204 N. RIVERSIDE DR. STREET ADDRESS 1.3 STREET ADDRESS **EDGEWATER FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE . DELETE 2.1 TITLE Change Addition HAUGHWOUT, JEAN NAME 2.2 NAME 204 N. RIVERSIDE DR. STREET ADDRESS 2.3 STREET ADDRESS **EDGEWATER FL** CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE Change Addition TITLE 3.1 TITLE HAUGHWOUT, KENNETH L. NAME 3.2 NAM 2204 ROYAL PALM STREET ADDRESS 33 STREET ADDRESS **EDGEWATER FL** CITY-ST-ZIP 3.4. CITY- \$1 - ZIP DELETE Change Addition TITLE 4.1 TO LE HAUGHWOUT, E. ROBERT 4. 2 NAME NAME 2513 ROYAL PALM DRIVE STREET ADDRESS 4.3 STREET ADDRESS **EDGEWATER FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TO UE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-Z#P 6.4 CHY-S1-ZIP 4. Thereby 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or on an attachment with an address. 1998 (904)428-1810 28