

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J61736 (1)
1. Corporation Name
PEACHTREE HOMES INC.

Principal Place of Business
3804 BRAMBLEWOOD BLVD.
LAND O'LAKES FL 34639

Mailing Address
3804 BRAMBLEWOOD BLVD.
LAND O'LAKES FL 34639



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 17002 Abastos De Arica Suite, Apt. #, etc. 22 City & State 23 TAMPA FL Zip Country 24 33613 25 Hillsborough		2a. Mailing Address 26 17002 Abastos De Arica Suite, Apt. #, etc. 27 City & State 28 TAMPA FL Zip Country 29 33613 30 Hillsborough		3. Date Incorporated or Qualified 03/13/1987	
				4. FEI Number 59-2843972	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ALLEN, WILLIAM G. 3804 BRAMBLEWOOD BLVD. LAND O'LAKES FL 34639		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
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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 William G. Allen President DATE 4/9/98
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 NAME STREET ADDRESS CITY - ST - ZIP	PDT ALLEN, WILLIAM G. 3804 BRAMBLEWOOD BLVD. LAND O LAKES FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PDT 17002 Abastos De Arica TAMPA FL 33613
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SV ALLEN, JOHANNA 3804 BRAMBLEWOOD BLVD. LAND O' LAKES FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	SV 17002 Abastos De Arica TAMPA FL 33613
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

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 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: William G. Allen President DATE 4-9-98

CR2E034 (10/97)