

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # J62915 (0)

1. Corporation Name

SOUTH FLORIDA MOTOR HOMES, INC.



Principal Place of Business

1955 SO. STATE RD#7  
FT. LAUDERDALE FL 33317  
US

Mailing Address

1955 SO STATE RD#7  
FT LAUDERDALE FL 33317  
US

3. Date Incorporated or Qualified  
03/12/1987

3a. Date of Last Report  
01/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

30

4. FEI Number  
65-0001446

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

10. Name and Address of New Registered Agent

PURDY, RICHARD A.  
1322 S.E. THIRD AVENUE  
FORT LAUDERDALE FL 33316

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 607.1506, 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 of person designated as registered agent (if not the corporation)

(If the Registered Agent is a corporation, the signature of the president or authorized officer is required)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP  
PRES  
SPREY, LEROY T  
3811 NE 27TH AVE  
LIGHTHOUSE PT FL

☐ DELETE

1.2 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

1.3 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

1.4 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

1.5 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

1.6 TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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)(k), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

954-792-3930  
Dialing Phone #

CR2E034 (12/95)