


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

FILED
Mar 30 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 # J74235 (9)
1. Corporation Name
FLORIDA PREFERRED PROPERTIES, INC.



Principal Place of Business 5103 FIVE ACRE RD. PLANT CITY FL 33565 US	Mailing Address 5103 FIVE ACRE RD. PLANT CITY FL 33565 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7611 FOUR PINES RD Suite, Apt. #, etc.		2a. Mailing Address 26 7611 FOUR PINES RD Suite, Apt. #, etc.		3. Date Incorporated or Qualified 05/21/1987
22 City & State 23 PLANT CITY, FL		27 City & State 28 PLANT CITY, FL		4. FEI Number 59-2825963 Applied For Not Applicable
24 Zip 33565		25 Country HILLSBORO		5. Certificate of Status Desired 8.75 Additional Fee Required
29 33565		30 Hillsboro		6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent EAKER, PAULA D 5103 FIVE ACRE RD. PLANT CITY FL 33565				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 7611 FOUR PINES RD 84 City PLANT CITY 85 Zip Code FL 33565	
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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: [Signature] DATE: 3/24/98
(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	STD EAKER, PAULA D 5103 FIVE ACRE RD. PLANT CITY FL 33565	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	7611 FOUR PINES RD PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EAKER, SHIRLEY M 5103 FIVE ACRE RD. PLANT CITY FL 33565	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	7611 FOUR PINES RD PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EAKER, H. LEE 5103 FIVE ACRE RD. PLANT CITY FL 33565	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	7611 FOUR PINES RD PLANT CITY, FL 33565
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: [Signature] H. Lee EAKER 3/24/98 8139819141

CR2E034 (10/97)