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



ANN	PROFIT PROPRATION JUAL REPORT 1997 JMENT # J82714		FLORIDA DEPAI Sandra I Secreta DIVISION OF	B. Mortary of Sta	ham le			May 14 Secreta				
BOVIS HOMES, INC. Principal Place of Business Mailing Address												
1916 BOOTHE CIR 1916 BOOTHE LONGWOOD FL 32750 LONGWOOD FL US US									1			
								 Date Incorporated or Qualified 07/15/1987 		ate of Last Ro /01/1996	eporl	
2. Principal	Place of Business		2a. Mailing Address 26					4. FEt Number 58-1743208		1 1	plied For LApplicable	
Suite, Ap	1. #, etc.	20]	Suite, Apt. #, etc.					5. Certificate of Status Desired	X	\$8.75 A	dditional	
22 City & Str	ate	27	City & State			<u> </u>		Election Campaign Financing		Fee Re \$5.00	'	
23		28						Trust Furid Contribution		Added to	,	
Zip 24	Country 25							8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	9. Name and Address of Currer	29 nt Regis	tered Agent	30	Ι.		l	10. Name and Address of New Re				
	G.C. CO.				81	Name						
2300 SUN BANK CENTER 200 S. ORANGE AVE ORLANDO FL 32801					82 Street Address (P.O. Box Number is Not Acceptable)							
UNDAYDO FL 32001					83							
					84	City				85 Zip C	`odo	
									FL	-		
office of	nt to the provisions of Sections 607.050 r registered agent, or both, in the State am familiar with, and accept the oblig	of Florid	07.1508, Florida Statu da. Such change was	les, the a authorize	above ed by	the corpo	corpor oration	ation submits this statement for the p n's board of directors. I hereby accep	urpose o tithe app	of changing its pointment as i	registered registered	
SIGNATURE	-	apons o	, 5000011 607.0005, F1	onda Sia	แมเยร	٠.						
12.	Signature, typed or punted frame of registered age OFFICERS AN			E Hegister		nt signature re	equired	when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE	NIDECTOR	S 181 42	
TITLE	DP OF THE CRO AN	DINEC	DELFTE		IJLE			ADDITIONS/CHANGES TO OFFIC	ENS AN	Change	Addition 6	
NAME	TYE, ARTHUR D.			: 1.2 NAME							8	
STREET ADDRESS	1916 BOOTHE CIR LONGWOOD FL		1.3 STREET ADDRESS							R2E034		
CITY-ST-ZIP	D		DELETE		CITY-S UTLF	I - ZiP			-	Change	Addition C	
NAME	WALFORD, R. N.		~	- 1	NAME							
STREET ADDRESS		E		2.33	STREET	ADDRESS						
CITY-ST-ZIP	CHELTENHAM, QLOUCES-				2 4 CHY-ST-ZIP 3 1 THLF					Channe	Addison	
TITLE NAME	ABERNATHY, JIMMY D.		L.J VIII II	- 4	MAME					Change	Addition	
STREET ADDRESS	1916 BOOTHE CIR					ADDRESS					{	
CITY-ST-ZIP	LONGWOOD FL				CITY-5	67 - 7IP						
TITLE			DELETE		UITE					Change	☐ Addition	
NAME STREET ADDRESS					NAME STREET	ADDRESS						
CITY-ST-ZIP					CITY-S							
TITLE			☐ DELETE	5.1	HTLE					Change	Addition	
NAME					MAME	466051						
STREET ADDRESS CITY-ST-ZIP	5				HREET Hey-s	ADDRESS T- 71P					-	
TITLE			DELETE		HTLF	1. Ed.				Change	Addition	
NAME				621	NAMÉ							
STREET ADDRESS	S					ADDRESS						
CITY-ST-ZIP				6.4 (IIY-S	T-ZIP			<u> </u>			

I do 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 eath; that I am an officer or director in the corporation or the receiver or trustee employeered 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.

+11 OHEVERMY K

FILED