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

PROFIT Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name K50933 (6)DAVIS HOMES, INC. Principal Place of Business Mailing Address 1111 NW 4TH AVE. 1111 NW 4TH AVE. DELRAY BCH FL 33444 DELRAY BCH FL 33444 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/13/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0086020 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DAVIS, DANIEL T. 1111 NW 4TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) **DELRAY BCH. FL 33444** 83 84 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE **DPVT** DELETE Addition 1.1 TITLE Change NAME DAVIS, DANIEL T. 1.2 NAME 1111 N.W. 4TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITL€ ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE TITLE 31 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 2000024358**43** thange -04/15/98--01006--003 DELETE TITLE 6.1 TITLE ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS ***300.00 CITY-ST-ZIP 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 13 if changes, or on an attachment with an alidress.

1/100

[BUILDING DIL A

FILED