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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

K53563

(8)

FILED Mar 20 1998 8:00am Secretary of State

WOODMERE HOMES, INC.				1 10416411 001 01103 11161 E1110 01163 1111 01201 (IÁIS Bháil albir alais Áláir (abi
-	* 715				
Principal Plac	e of Business	Mailing Address) Indiana ani misna (simi missa stara stat minti	idii gidii didii didii afdii iddi
7777 GLADES	S ROAD	7777 GLADES ROAD			
SUITE 410 SUITE 410 BOCA RATON FL 33434 BOCA RATON FL 33434				DO NOT WRITE IN TH	S SPACE
5001111101112 00101				3. Date Incorporated or Qualified	
				12/23/1988	
		2a. Mailing Address		4. FEI Number	Applied For
21 26				65-0088507	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		<u>}</u>		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28	Country	8. This corporation owes or has paid the	
24	25	January 1	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current			10. Name and Address of New Registers	
UN	IITED STATES CORPORATION CO	OMPANY	81 Name	callen feating Company	
	B WEST GEORGIA STREET	P100 7 11 4 4	82 Street Addr	ration Service Company	
TALLAHASSEE FL 32301			1201 H	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
			Taibn	ú5566 F	L 82301
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 registerer					
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 ager	· · ·	Registered Agent signature requir		
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
	WIENER, ELLIOTT M	C DEFEIC	1,2 NAME		C Change C Roomon
NAME Street adoress	7777 GLADES RD. #410		1.3 STREET ADDRESS		:
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP		
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	ARMSTRONG, JOEL		2.2 NAME		
STREET ADDRESS	7777 GLADES ROAD, SUITE 4	110	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33434	110	2. 4 CITY-ST-ZIP		
TITLE	VTSD	☐ DELETE	3.1 TITLE		Change Addition
NAME	HOYOS, JEFFREY		3.2 NAME		
STREET ADDRESS	7777 GLADES RD		3.3 STREET ADDRESS		
CITY - ST - ZIP	BOCA RATON FL		3.4. CITY-ST-ZIP		
TITLE	VSD	☐ DELETE	4.1 TITLE		Change Addition
NAME	WEST, ALFRED G		4. 2 NAME		Ì
STREET ADDRESS	7777 GLADES RD. #410		4.3 STREET ADDRESS		
CITY-ST-ZIP	80CA RATON FL		4.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	5.1 TITLE		Change Addition
NAME	SLEEK, HARRY T		5.2 NAME		
STREET ADDRESS	7777 GLADES RD #410		5.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY-ST-ZIP		
TITLE	V	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	DAMIANO, THOMAS		6.2 NAME		
STREET ADDRESS	7777 GLADES RD #410		63 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	to the Olina along and accept of	6.4 CITY-ST-ZIP	Caption 110 07/21/i) Elecide Statutes I further	portify that the information

14. Thereby 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 or supplemental annual report or supplemental annual report or the receiver or the receiver or this specified 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.

CIGNATURE.

leffer, Hours =-14-98 FW 482-510