FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 11:40

DOCUMENT # K82096 (4)

1. Corporate Name

WAYNE FRIER'S MOBILE HOME SALES, INC.

Principal Address

% WAYNE FRIER
RR 8 BOX 1048
LIVE OAK FL 32060

Mailing Address

% WAYNE FRIER
RR 8 BOX 1048
LIVE OAK FL 32060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/20/1989

3a. Date of Last Report: 01/27/1994

2. FEI Number: 59-2948483

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. The corporation has paid, or intends to pay, the tax under S. 199.032 Florida Statutes: Yes / No

21 Name
22 Street Address
23 City
24 State
25 Zip Code
26 Mailing Address
27 Street Address
28 City
29 State
30 Zip Code

9. Name and Address of Current Registered Agent

FRIER, WAYNE
ROUTE 8
BOX 1048
LIVE OAK FL 32060

10. Name and Address of New Registered Agent

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 Section 607.0505, Florida Statutes, the above named corporation submits the 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. Hereby, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FRIER, WAYNE
STREET ADDRESS	ROUTE 8, BOX 1048
CITY, ST, ZIP	LIVE OAK FL
TITLE	VST
NAME	FRIER, WANDA
STREET ADDRESS	RR 8 BOX 1048
CITY, ST, ZIP	LIVE OAK FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE	VST	XX Change ☐ Addition
NAME	Lorraine Sharpless	
STREET ADDRESS	Rt. 8, Box 1048	
CITY, ST, ZIP	Live Oak, FL 32060	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information supplied with this report, including any attachments, is true and complete. Failure to file the complete and accurate information required by Section 607.0505 Florida Statutes, may result in the revocation of this corporation's right to transact business in Florida. Pursuant to the provisions of this section, the filing of a false report or supplemental annual report is fraud and perjury and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of this corporation or the agent of a foreign corporation authorized to transact business in the State of Florida, and that I have read the report or supplemental report and have authorized the filing of the report or supplemental report with my signature.

SIGNATURE: Wayne Frier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-95 904/362-6306
DATE TELEPHONE NUMBER

0008441 CP