

6-4-97 B 7750 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jun 04 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # L52771 (7)
1. Corporation Name
OLYMPIA HOMES, INC.



Principal Place of Business
C/O PHILIP TATCH
601 S LAKE DESTINY RD #200
MAITLAND FL 32751

Mailing Address
C/O PHILIP TATCH
601 S LAKE DESTINY RD #200
MAITLAND FL 32751-7262

| | |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21 Graham, Jessie | 26 Graham, Jessie |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| 22 369 N. New York Av. | 27 369 N. New York Av. |
| City & State | City & State |
| 23 Winter Park, FL | 28 Winter Park, FL |
| Zip | Zip |
| 24 32789 | 29 32789 |
| Country | Country |
| 25 Orange | 30 Orange |

| | |
|---|---|
| 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 02/19/1990 | 05/01/1996 |
| 4. FEI Number | Applied For |
| 59-3001215 | Not Applicable |
| 5. Certificate of Status Desired | <input type="checkbox"/> \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution | <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| | |
|--|---|
| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
| TATCH, PHILIP 601 S LAKE DESTINY RD #200 MAITLAND FL 32751 | 81 Name Graham, Jessie |
| | 82 Street Address (P.O. Box Number is Not Acceptable) |
| | 369 N. New York Avenue |
| | 83 |
| | 84 City |
| | Winter Park FL |
| | 85 Zip Code |
| | 32789 |

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 _____ DATE 4/24/97
(NOTE: Registered Agent's signature required when re-registering)

| | |
|--|---|
| 12. OFFICERS AND DIRECTORS | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | 1.1 TITLE |
| NAME | 1.2 NAME |
| STREET ADDRESS | 1.3 STREET ADDRESS |
| CITY-ST-ZIP | 1.4 CITY-ST-ZIP |
| P. SCHAUB, FREDERICK G. 222 S WESTMONTE DR #210 ALTAMONTE SPRINGS FL | P.D. Joseph Kantor 222 S. Westmonte Dr. #210 Altamonte Springs, FL 32714 |
| TITLE | 2.1 TITLE |
| NAME | 2.2 NAME |
| STREET ADDRESS | 2.3 STREET ADDRESS |
| CITY-ST-ZIP | 2.4 CITY-ST-ZIP |
| V.D. KANTOR, JOSEPH 222 S WESTMONTE DR #210 ALTAMONTE SPRINGS FL | V.D. Steve Mardinger 222 S. Westmonte Dr., #210 Altamonte Springs, FL 32714 |
| TITLE | 3.1 TITLE |
| NAME | 3.2 NAME |
| STREET ADDRESS | 3.3 STREET ADDRESS |
| CITY-ST-ZIP | 3.4 CITY-ST-ZIP |
| TITLE | 4.1 TITLE |
| NAME | 4.2 NAME |
| STREET ADDRESS | 4.3 STREET ADDRESS |
| CITY-ST-ZIP | 4.4 CITY-ST-ZIP |
| TITLE | 5.1 TITLE |
| NAME | 5.2 NAME |
| STREET ADDRESS | 5.3 STREET ADDRESS |
| CITY-ST-ZIP | 5.4 CITY-ST-ZIP |
| TITLE | 6.1 TITLE |
| NAME | 6.2 NAME |
| STREET ADDRESS | 6.3 STREET ADDRESS |
| CITY-ST-ZIP | 6.4 CITY-ST-ZIP |

14. 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 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: _____ DATE 4/24/97 407/ 682-6940

CR2E034 (9/96)