

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 AUG -7 AM 11:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **L88806 (9)**

1. Corporation Name
NEWHOME SALES & REALTY CORPORATION

Principal Place of Business P.O. BOX 1243 NEW SMYRNA BEACH FL 32170-1243	Mailing Address P.O. BOX 1243 NEW SMYRNA BEACH FL 32170-1243
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/20/1990	3a. Date of Last Report 08/17/1994
4. FEI Number 59-3023220	Applied For <input type="checkbox"/> 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 § 100 (1)(9) Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 1896 Spruce Creek Blvd. E. Suite, Apt. #, etc.	2a. Mailing Address 26 1896 Spruce Creek Blvd. E. Suite, Apt. #, etc.
22 City & State 23 Daytona Beach, FL	27 City & State 28 Daytona Beach, FL
24 Zip 32124	25 Country USA
29 Zip 32124	30 Country USA

9. Name and Address of Current Registered Agent FRIEDMAN, RICHARD A. 1896 SPRUCE CREEK BLVD E DAYTONA BCH FL 32124		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 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 amending) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	NAME ELLIOTT, MICHAEL	11 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS BUT CLEVELAND ST #400	CITY, ST, ZIP CLEARWATER FL	12 NAME	Lynne Hunt Doten
		13 STREET ADDRESS	1895 Spruce Creek Blvd E.
		14 CITY, ST, ZIP	Daytona Beach, FL 32124
TITLE	NAME	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		22 NAME	
CITY, ST, ZIP		23 STREET ADDRESS	
		24 CITY, ST, ZIP	
		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY, ST, ZIP	
		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	
		43 STREET ADDRESS	
		44 CITY, ST, ZIP	
		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		52 NAME	
		53 STREET ADDRESS	
		54 CITY, ST, ZIP	
		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		62 NAME	
		63 STREET ADDRESS	
		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: **President** **Aug. 1, 95**