

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
Oct 07 1998 8:00am  
Secretary of State

0061130

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M51651** (1)

1. Corporation Name

**YANKEE GO HOME, INC.**

Principal Place of Business

Mailing Address

**C/O SPIKE VON ZAMFT  
17120 JUPITER FARMS ROAD  
JUPITER FL 33478**

**C/O SPIKE VON ZAMFT  
17120 JUPITER FARMS ROAD  
JUPITER FL 33478**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/06/1987**

4. FEI Number

**NOT APPLICABLE**

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. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **9 MARLWOOD LANE**

26 **P.O. BOX 1817**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **PALM BEACH GARDENS, FL.**

28 **JUPITER FL.**

Zip

Country

Zip

Country

24 **33418**

25 **USA**

29 **33468**

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VON ZAMFT, SPIKE  
17120 JUPITER FARMS ROAD  
JUPITER FL 33478**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**9 MARLWOOD LANE**

83

84 City

**PALM BEACH GARDENS FL**

85 Zip Code

**33418**

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ DELETE

NAME **VON ZAMFT, SPIKE**

STREET ADDRESS **17120 JUPITER FARMS RD**

CITY-STATE-ZIP **JUPITER FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

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STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **SAME** ☒ Change ☐ Addition

1.2 NAME **SAME**

1.3 STREET ADDRESS **9 MARLWOOD LANE**

1.4 CITY-STATE-ZIP **PALM BEACH GARDENS, FL 33418**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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:

**SIGNATURE REQUIRED**

**9-28-98 7813**

**561-630-**

CR2E034 (5/98)