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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

H & R INTERSTATE MOBILE HOMES, INC.

FILED Jan 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address % CARL D. HILL % CARL D. HILL 35267 HWY 54 WEST 35267 HWY 54 WEST ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/03/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2876467 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RYMAN, NELSON L. 811 35267 HWY 54 WEST Street Address (P.O. Box Number is Not Acceptable) 82 ZEPHRHILLS FL 33541 83 84 City 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 reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change RYMAN, NELSON L NAME 1.2 NAME 38819 OTIS ALLEN ROAD STREET ADDRESS 1.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition HILL, KIMBERLY A NAME 2.2 NAME 34740 CARL AVE. 2.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition HILL, CARL D. NAME 3.2 NAME 34740 CARL AVE. STREET ADDRESS 3.3 STREET ADDRESS ZEPHYRHILLS FL CITY - ST - ZIP 3.4. CITY - ST-ZIP ☐ Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 repeiver or trustee exprovered 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 paddies.

SIGNATURE:

No Low L. Kumm Pres 1/07/98

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