


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M74055 (8) 1. Corporation Name PRIMAVERA HOMES OF FLORIDA, INC.					
Principal Place of Business C/O LOUISE GINA ZARBO 1281 SAXON BLVD DELTONA FL 32725			Mailing Address C/O LOUISE GINA ZARBO 1281 SAXON BLVD DELTONA FL 32725		
2. Principal Place of Business 21 1357 Providence Blvd Suite, Apt. #, etc. 22 DE City & State 23 DELTONA FL 32725 Zip 24 32725		2a. Mailing Address 26 1357 Providence Blvd Suite, Apt. #, etc. 27 DE City & State 28 DELTONA FL Zip 29 32725		Country 25 FLORIDA 30 FLORIDA	
9. Name and Address of Current Registered Agent ZARBO, LOUISE GINA 401 EAST VISCAYA CIRCLE DELTONA FL			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL		
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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 TITLE	Change	Addition
NAME	ZARBO, SALVATORE		1.2 NAME		
STREET ADDRESS	401 E. VISCAYA CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE	Change	Addition
NAME	ZARBO, LOUISE GINA		2.2 NAME		
STREET ADDRESS	401 E. VISCAYA CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL		2.4 CITY-ST-ZIP		
TITLE	SECRETARY	DELETE	3.1 TITLE	Change	Addition
NAME	MESHAUT, GALA		3.2 NAME		
STREET ADDRESS	932 HYER ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32803		3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	Change	Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	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 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:  RED



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/25/1988	
4. FEI Number 59-2885733	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

CR2E034 (10/97)