

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

10/2

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morthagt Secretary of State DIVISION OF CORPORATIONS
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FILED

97 SEP 18 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M 89 277
1. Corporation Name
RESIDENCES, INC.

Principal Place of Business
5135 WOOD AVE N
B
TAMPA, FL 33684

Mailing Address
C/O 17902 Clearlake Drive
Lutz, FL 33549

2. Principal Place of Business 21 5135 WOOD AVE N Suite, Apt. #, etc. 22 B City & State 23 TAMPA, FL Zip 24 33684	2a. Mailing Address 26 C/O 17902 Clearlake Drive Suite, Apt. #, etc. 27 City & State 28 Lutz, FL Zip 29 33549
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3. Date Incorporated or Qualified 7/12/1988	3a. Date of Last Report
4. FEI Number 59-2910600	Applied For 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Arthur Bullard, Jr.
17902 Clearlake Drive
Lutz, FL 33549

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 900002300599-5 -09/23/97--01025--010
84 City ***165 FL ***085.00

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	<input type="checkbox"/> DELETE
NAME	BULLARD, ARTHUR JR
STREET ADDRESS	17902 Clearlake Drive
CITY-ST-ZIP	Lutz, FL 33549
TITLE	<input type="checkbox"/> DELETE
NAME	BULLARD, KATHERINE M
STREET ADDRESS	17902 Clearlake Drive
CITY-ST-ZIP	Lutz, FL 33549
TITLE	<input type="checkbox"/> DELETE
NAME	BAKER, MOSES JR
STREET ADDRESS	8479 THOUSAND PINE CIRCLE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
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 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: _____
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
9/3/97 813-949-1462

CR2E034 (9/96)

2082

RESIDENCES, INC.
C/O 17902 Clearlake Drive
Lutz, Florida 33549
September 3, 1997

Division Of Corporation
Corporate Records
P.O. Box 6327
Tallahassee, Fl 32314

Dear Sir or Madame:

Per a recent conversation with agency personnel (Leslie), please be advised Residences, Inc. did not timely receive documents for filing. Documents were just recently forwarded and received.

Additionally, find enclosed the sum of \$165.00 for reinstatement as instructed.

Thanks.

Sincerely,



Arthur Bullard, Jr.
President