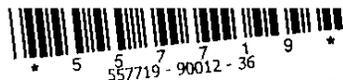


FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90144 044 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000002497
 1. Corporation Name
FLORAHOME RECREATION AND PARKS ASSOCIATION, INC.



Principal Place of Business P O BOX 82 FLORAHOME FL 32140	Mailing Address P O BOX 82 FLORAHOME FL 32140
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 04/29/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-35155 08 Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
PETERSON, AMANDA 184 EASY ST FLORAHOME FL 32140		81 Name	85 Zip Code
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL

14. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	Chairman
STREET ADDRESS		1.3 STREET ADDRESS	James D. Hubner
CITY-ST-ZIP		1.4 CITY-ST-ZIP	124 N Sipprell Road Florahome, FL 32140
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Secretary
STREET ADDRESS		2.3 STREET ADDRESS	Amarida Peterson
CITY-ST-ZIP		2.4 CITY-ST-ZIP	184 Easy Street Florahome, FL 32140
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Treasurer
STREET ADDRESS		3.3 STREET ADDRESS	Lor. Underwood
CITY-ST-ZIP		3.4 CITY-ST-ZIP	250 T.S.B.R. Florahome, FL 32140
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	D
STREET ADDRESS		4.3 STREET ADDRESS	Linda Dixon
CITY-ST-ZIP		4.4 CITY-ST-ZIP	1151 Coral Farms Rd Florahome, FL 32140
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	D
STREET ADDRESS		5.3 STREET ADDRESS	Ronnie Carnes
CITY-ST-ZIP		5.4 CITY-ST-ZIP	507 Coral Farms Rd Florahome, FL 32140
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	D
STREET ADDRESS		6.3 STREET ADDRESS	Christina Hubner
CITY-ST-ZIP		6.4 CITY-ST-ZIP	124 N. Sipprell Road Florahome, FL 32140

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Amarida Peterson* **SIGNATURE REQUIRED** Date: 4/21/99 Daytime Phone #: 904-325-2041

CR2E037 (4/1/98)