.FILE NOW: F	ILING	FEE	AFTER	MAY	1ST IS	\$550.00
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06-17-1999 90007 020 *** 150 00 **PROFIT** FLORIDA DEPARTMENT OF STATE P93000007639 CORPORATION Katherine Harris ANNUAL REPORT Secretary of State - .1999. DIVISION OF CORPORATIONS FILED DOCUMENT # P9300007639 59 JUL 21 PH 1: 36 **BADGER HOMES INCORPORATED** Principal Place of Business Mailing Address 11147 HEARTWOOD PL 11147 HEARTWOOD PL WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/27/1993 2. Principal Place of Business 2a. Malling Address Applied For 65-0485754 21 26 **Not Applicable** Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 Trust Fund Contribution Added to Fees Country Zio Country Zio 8. This corporation owes the current year intangible 30 ☐ Yes 24 25 29 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHASE, DANIEL A Street Address (P.O. Box Number is Not Acceptable) 11147 HEARTWOOD PL WEST PALM BEACH FL 33414 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 807.0505, Florida Statutes. SIGNATURE rad Agent signatura required when h OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 DELETE 1.1 TITLE TITLE CHASE, DANIEL A NAME 1.2 NAME 11147 HEARWOOD PL STREET ADDRESS 13 STREET ADORESS WEST PALM BEACH FL 33414 1.4 C/TY-ST-ZIP CITY-ST-ZP DELETE Change Addition TITLE 21 TITLE 2 ? NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CRY-ST-20 DELETE Change Addition TILE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-81-21P Addition DELETE Change TITLE 4.1 TITLE 4.2 NAME STREET ADDRESS A 1 STREET ADORESS 4.4 CITY-ST-ZIP CITY-81-2P DELETE Change ☐ Addition 51 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ANYOGESS 54 OTY-ST-ZIP CITY-ST-ZIP DELETE 81 TITLE Change Addition TITLE 62 NAME NWE

64 C/TY-ST-2IP CITY-51-29 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Floride Statutes. I further certify that the information indicated on this annual report or supplemental sinual 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 corpolation or the receive) or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or flock 13 or changed, overlap state that my name address, with all other like empowered.

6.3 STREET ADDRESS

OR PRINTED HAME OF SIGNING OFFICER ON DIRECTOR

STREET ADDRESS

CRZE034 (11/98)