

5-7-98 B6139C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000025611 (3)
1. Corporation Name
COMMUNITY DEVELOPMENT CONTRACTORS, INC.

Principal Place of Business 2100 24TH ST SW LARGO FL 34644 US	Mailing Address POB 22791 TAMPA FL 33622 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3813 N. NEBRASKA AVENUE Suite, Apt. #, etc. 22 City & State TAMPA, FL 23 Zip 33603-5015 24 Country USA		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 04/07/1993	
				4. FEI Number 59-3168368	
				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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent LEEKS, MICHAEL D. 2100 24TH STREET SW LARGO FL 34644		10. Name and Address of New Registered Agent 81 Name MICHAEL D. LEEKS 82 Street Address (P.O. Box Number is Not Acceptable) 3813 N. NEBRASKA AVENUE 83 84 City TAMPA FL 85 Zip Code 33603	
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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 MICHAEL D. LEEKS, PRES. 4-23-98
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 NAME STREET ADDRESS CITY-ST-ZIP	PTD LEEKS, MICHAEL D. 2100 24TH STREET SW LARGO FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PTD LEEKS, MICHAEL D. 3813 N. NEBRASKA AVENUE TAMPA, FL 33603-5015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HILL, TRAVIS E. 4916 N 37TH STREET TAMPA FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VSD HILL, TRAVIS E. 3813 N. NEBRASKA AVENUE TAMPA, FL 33603-5015
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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, on an attachment with an address.

SIGNATURE: MICHAEL D. LEEKS 4-23-98 (813) 581-5013

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