SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000029509 (5)

PRINCIPAL HOMES & DEVELOPMENT, INC.

FILED Sep 03 1998 8:00am Secretary of State

	•			
Principal Plac	e of Business	Mailing Address	<u> </u>	
226-5 SOLANA RD		226-5 SOLANO RD		
STE 166	110	STE 166		
	EBACH FL 32082	PONTE VEDRA BEAHC FL 32082		DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualified
				04/22/1993
2. Principal Place of Business		2a. Malling Address		4. FEI Number Applied For
21		26		59-3178108 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		[27]		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		[28]		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intengible
24	[25]		80	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
ACCOUNTING FOR YOU, INC. 81 Name JAMES K WHEELE ORD, CPA				
200 EXECUTIVE WAY			82 Street : work	ους με ουχ number is Not Acceptable)
PONTE VEDRA FL 32082				ELECOTO G WAT
			83 /	
			84 City	85 Zip Code
			Powr	
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 1/25/98				
ļ <u></u>	Signature, typed or printed name of registered ager		E: Registered Agent signature requi	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	OLD, PETER	L DELETE	1.1 TITLE	Change Addition
NAME	355 NORTH ROSCOE BLVD		1.2 NAME	
STREET ADDRESS	PONTE VEDRA BEACH FL		1.3 STREET ADDRESS	
CITY-ST-ZIP	V V V V V V V V V V V V V V V V V V V		1.4 CITY-ST-ZIP	
TITLE	•	DELETE	2.1 TITLE	Change Addition
NAME	BOWMAN, DUNCAN		2.2 NAME	
STREET ADDRESS	2804 S. SECOND ST.		2.3 STREET ADDRESS	,
CITY-ST-ZIP	JACKSONVILLE BCH. FL		2.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			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	j
14 I hereby co	rdifu that the information curning with	this filing does not qualify for the		ion 119 07/3\/i) Florido Statutos I further certify that the information

indicated on this annual report or supplied with misming does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 truetee empower of 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 in an attachage myth ap address.