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

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400000555 (0)

HOUSE ENTERPRISE, INC.

Principal Place of Business

HWY 270 GREENSBORO	FL	PO BOX 1505 QUINCY FL 32353-1505							
						3. Date Incorporated or Qualified 01/04/1994	3a. Date of Last Report 05/01/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		A	oplied For
21 3108	3108 W TENNESSEE 26 3108 W. TENN			ressee 59-3261462		59-3261462	Not Applicable		
Sulte, Apt.	Sulte, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired
City & State  23 TALLAHASSEE FLOKIDA		City & State  28 TAUNHASSAZ, FLOK			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	[ Coun	•		8. This corporation has liability for f		tax under s	. 199.032,
24 <u>3230</u>	14 25 1JSA	29 32304	30	υs	. A			No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Re	gistered #	gent	
TRAVIS, ROBERT L JR					Name				
16 N ADAMS ST				B2	Ctroot Add	ress (P.O. Box Number is Not Acceptab	(0)		- <del></del>
QUINCY FL 32351				02	Street Audr	ess (r.o. Box Number is Not Acceptab	16)		
401	1407 1 6 02001		la la	83		TWO THE TAXABLE PROPERTY OF THE PROPERTY OF TH			
							· <del>-</del>		
				84	City		FL	<b>85 Z</b> ip	Code
agent. I a SIGNATURE:	m familiar with, and accept the obligation of th				s gnature requi	red whon reinstaling)	DATE		
12.			13.	13. ADDITIONS/CHANGI			TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 1111	1.1 TITLE				Change	Addition
NAME	YOUSE, JOHNNIE JR		1,2 NAM	ME					
STREET ADDRESS	I NASA AMA			RET AT	DORESS				
CITY-ST-ZIP	GREENSBORO FL 32330		1.4 CIT		· · · · · · · · · · · · · · · · · · ·				
TITLE		T DECETE	2.1 100		=======================================			Change	Addition
NAME			2.2 NAM						
STREET ADDRESS					DDRESS				
			2.9 OIT						
CITY-ST-ZIP		DELETE	2. N CH 3 1 THL		·ZR·			Change	Addition
NAME :		First Occup	3 2 NAM			·		- Stierige	/ 100°((01)
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STREET ADDRESS					DDRESS				
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NAME			4. P NA						
STREET ADDRESS			4.3 \$TR	REET AL	DDRESS				

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 atlant with an address.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS 5.4 CITY - ST <u>- 71</u>P

63 STREET ADDRESS

5.1 1111.8

5.2 NAME

6.1 TITLE

6.2 NAME

CIGNATURE.

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ALL BUCKETTO

DELETE

DELETE

Tobonie House 5/1/97

576-8206

Change

Addition

Addition

**FILED** 

May 09 1997 8:00am

Secretary of State