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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sun Belt Division
Secretary of State
Division of Corporations

DOCUMENT # P94000056956 (3)

1. Corporation Name

KEYSTONE HOMES, INC.



2. Principal Office Address

2601 W FOUNTAIN BLVD
TAMPA FL 33609

3. Mailing Address

2601 W FOUNTAIN BLVD
TAMPA FL 33609

4. Principal Office Address

21 4014 W DeLeon St.
Tampa, FL 33609

5. Mailing Address

26 4014 W DeLeon St.
Tampa, FL 33609

6. City/State

23 TAMPA, FLA

7. City/State

28 TAMPA, FLA

8. Zip

24 33609

9. Country

25 USA

10. Zip

29 33609

11. Country

30 USA

9. Name and Address of Current Registered Agent

MCCLAIN, WAYNE A
2601 W FOUNTAIN BLVD
TAMPA FL 33609

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85 Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is subject to the jurisdiction of the State of Florida for the purpose of changing its registered office and registered agent, and that the undersigned is authorized by the corporation to execute this statement and to file the same with the Department of State.

12. Signature

MCCLAIN, WAYNE A
2601 W FOUNTAIN BLVD
TAMPA FL

WAYNE MCCLAIN

1/15/96

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, ETC.

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is subject to the jurisdiction of the State of Florida for the purpose of changing its registered office and registered agent, and that the undersigned is authorized by the corporation to execute this statement and to file the same with the Department of State.

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21. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is subject to the jurisdiction of the State of Florida for the purpose of changing its registered office and registered agent, and that the undersigned is authorized by the corporation to execute this statement and to file the same with the Department of State.

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WAYNE MCCLAIN

1/15/96

(813) 877-8600

CR2E034 (12/95)