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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

107203	39 (B)							
MASTERPIECE HOMES, INC.								
Principal Place of Business Mailing Address					-	ONLL BREIK HOUL		B   B
P.O. BOX	740917							
1 1495 S. VOLUSIA AVE. P.O. BOX 740917 STE 202 ORANGE CITY FL 32774 ORANGE CITY FL 32763					DO NOT WE	TE IN THIS S	PACE.	
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ncipal Place of Business 2a, Mailing Address					4. FEI Number		Ar	plied For
26					59-3271971		No	t Applicable
uite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	
27   City & State   City & State								<del>'</del> -
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2 and 607.1508, of Florida, Such itions of, Sectlor	, Florida Statute i change was a n 607.0505, Flo	es, the ab authorized orida Stati	d by utes	-named corporation	oration submits this statement for the on's board of directors. I hereby acc	e purpose of cept the app	changing it ointment as	registered registered
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	ie. (NOTE		l Ager	nt signature require		DATE	DIRECTOR	20.11.40
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	Mailing Ad P.O. BOX ORANGE O  2a. Mailing 26 Suite, A  27 City & 3  28 Zip 29 t Registered Ad  2 and 607.1508 of Florida. Such tions of, Sections and little if applicab	P.O. BOX 740917 ORANGE CITY FL 32774  2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 t Registered Agent  2 and 607.1508, Florida Statute of Florida. Such change was a stions of, Section 607.0505, Florida and little if applicable. (NOTION DELETE)  DELETE DELETE DELETE DELETE	Mailing Address P.O. BOX 740917 ORANGE CITY FL 32774   2a. Mailing Address 28 Suite, Apt. #, etc. 27 City & State 28 Zip Cou 29 30 t Registered Agent  2 and 607, 1508, Fiorida Statutes, the at of Florida. Such change was authorizedations of, Section 607, 0505, Florida Statutoris of, Section 607, 0505, Florida Statutoris of, DIRECTORS 13. DELETE 1,1 TII 1,2 N/- 1,3 ST 1,4 CI 1,0 DELETE 2,1 TI 22 N/- 23 ST 2,4 CI 1,0 DELETE 3,1 TI 32 N/- 33 ST 34, CI 1,2 N/- 33 ST 34, CI 1,3 ST 34, CI 1,4 CI 1,4 CI 1,5	Mailing Address P.O. BOX 740917 ORANGE CITY FL 32774    2a. Mailing Address   28     Suite, Apt. #, etc.   27     City & State   28     Zip	Mailing Address P.O. BOX 740917 ORANGE CITY FL 32774   2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 30 t Registered Agent 81 Name 82 Street Address 83 84 City 29 and 607, 1508, Florida Statutes, the above-named corporations of, Section 607,0505, Florida Statutes.  The address of the properties of the corporations of, Section 607,0505, Florida Statutes.  Directors  13. 13. 11TILE 1,2 NAME 1,3 STREET ADDRESS 1,4 CITY-ST-ZIP 1. DELETE 2,1 TITLE 2,2 NAME 2,3 STREET ADDRESS 2,4 CITY-ST-ZIP 1. DELETE 3,1 TITLE 4,2 NAME 3,3 STREET ADDRESS 3,4 CITY-ST-ZIP 1. DELETE 4,1 TITLE 4,2 NAME 4,3 STREET ADDRESS 4,4 CITY-ST-ZIP 4,1 TITLE 4,2 NAME 4,3 STREET ADDRESS 4,4 CITY-ST-ZIP 4,1 TITLE 4,2 NAME 4,3 STREET ADDRESS 4,4 CITY-ST-ZIP	Mailing Address P.O. BOX 740917 ORANGE CITY FL 32774   2a. Mailing Address 2b. Jan Helmorporated or Qualifier 09/27/1994  4. FEI Number 59-3271971  5. Certificate of Status Desired 27  City & State 28  Country 30  Registered Agent  10. Name and Address of New 1  81 Name 82 Street Address (P.O. Box Number is Not Accepted by the corporation's board of directors. I hereby accepted by the corporation's Doard of directors. I hereby accepted by the Corporation's Doard of directors. I hereby accepted by the Corpor	Mailing Address  P.O. BOX 740917 ORANSE CITY FL 32774   DO NOT WRITE IN THIS S.  3. Date Incorporated or Qualified 09/27/1994  4. FEI Number 28. 4. FEI Number 28. 59-3271971  Suite, Apt. #, etc. 27. 5. Certificate of Status Desired  28. Trust Fund Contribution 29. 30. 8. This corporation owes or has paid the cur 29. 20. Name and Address of New Registered.  81. Name 82. Street Address (P.O. Box Number is Not Acceptable)  83. 84. City  City Street Address (P.O. Box Number is Not Acceptable)  84. City  FL. 20. Street Address of directors. I hereby accept the apptitions of, Section 607.0505, Florida Statules.  11. Name and Address of New Registered.  83. ADDITIONS/CHANGES TO OFFICERS AND 10. DELETE 11. TITLE 12. NAME 13. STREET ADDRESS 14. City-ST-2P 13. ADDITIONS/CHANGES TO OFFICERS AND 13. ADDITIONS/CHANGES TO OFFICERS AND 14. TITLE 15.	Mailing Address P.O. BOX 740917 ORANGE CITY FL 32774  2a. Mailing Address 2d 2b. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 City & State 29 30 Personal Property Tax due June 30. J'Yes 10, Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip 6 Florida Statutes. The above-named corporation submits this statement for the purpose of changing in of Florida, Statutes. 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip 10 Florida Statutes. The above-named corporation submits this statement for the purpose of changing in of Florida, Statutes. 83 84 City FL 85 Zip Country Street Address (P.O. Box Number is Not Acceptable) 85 DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR 1.1 TITLE 1.2 WAME 1.3 STREET ADDRESS 2.4 SUFY-ST-ZP 1.1 DELETE 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 2.4 SUFY-ST-ZP 1.2 DELETE 4.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 SUFY-ST-ZP 1.1 Change 4.2 NAME 4.3 STREET ADDRESS 4.4 SUFY-ST-ZP 1.2 Change 1.3 STREET ADDRESS 4.4 SUFY-ST-ZP 1.3 STREET ADDRESS 4.4 SUFY-ST-ZP 1.4 STREET ADDRESS 4.4 SUFY-ST-ZP 1.5 Change 1

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**FILED** 

Feb 04 1998 8:00am

Secretary of State