SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000075338 (1)**

1. Corporation Name

KATHWARD HOMES, INC.

Principal Place of Business	Mailing Address
1625 LANDS END RD 2255 GLADES RD., SUITE 319 - ATRIUM NANAGALAN FL 33462 US	1625 LANDS END RD 2255 GLADES RD., SUITE 319 - ATRIUM MANAPALAN FL 33462 US

3. Date Incorporated or Qualified: 10/13/1994
3a. Date of Last Report: 05/26/1995
4. FEI Number: 65-0527036 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Route 3 Box 227-H	26 7011 Herndon Rd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Greenville, NC	City & State 28 Millen, GA
Zip 24 27858 Country 25	Zip 29 30442 Country 30

9. Name and Address of Current Registered Agent

CHARLTON, KATHLEEN L
1625 LANDS END RD
SUITE 319 ATRIUM
MANAPALAN FL 33462

10. Name and Address of New Registered Agent

81 Name: BARNETT ROBINSON JR., P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 2255 Glades Road
83 Suite 319 ATRIUM - One Boca Place
84 City: BOCA RATON FL 85 Zip Code: 33

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: X Kathleen Charlton 6/28/96 President KATHLEEN CHARLTON
(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	PTD	☐ DELETE	11 TITLE	☒ Change ☐ Addition
NAME	CHARLTON, KATHLEEN		12 NAME	
STREET ADDRESS	1625 LANDS END RD		13 STREET ADDRESS	7011 Herndon Road
CITY-ST-ZIP	MANAPALAN FL		14 CITY-ST-ZIP	Millen, GA. 30442
TITLE	VP	☐ DELETE	21 TITLE	☒ Change ☐ Addition
NAME	BRXTON, EDWARD E JR		22 NAME	
STREET ADDRESS	1625 LANDS END RD		23 STREET ADDRESS	7011 Herndon Road
CITY-ST-ZIP	MANAPALAN FL		24 CITY-ST-ZIP	Millen, GA. 30442
TITLE	S	☐ DELETE	31 TITLE	☒ Change ☐ Addition
NAME	BRAXTON, ANN S		32 NAME	
STREET ADDRESS	1625 LAND S END RD		33 STREET ADDRESS	Route 3 Box 227-H
CITY-ST-ZIP	MANAPALAN FL		34 CITY-ST-ZIP	Greenville, NC 27858
TITLE		☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME			42 NAME	
STREET ADDRESS			43 STREET ADDRESS	
CITY-ST-ZIP			44 CITY-ST-ZIP	
TITLE		☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME			52 NAME	
STREET ADDRESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME			62 NAME	
STREET ADDRESS			63 STREET ADDRESS	
CITY-ST-ZIP			64 CITY-ST-ZIP	

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Kathleen Charlton 6/28/96 KATHLEEN CHARLTON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone # 912-982-5534