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

Apr 15 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P94000079089 (6) DOCUMENT # EXCLUSIVELY LOTS, INC. Principal Place of Business Mailing Address 14041 US HWY 1 14041 US HWY 1 DO NOT WRITE IN THIS SPACE JUNO BEACH FL 33408 JUNO BEACH FL 33408 3. Date Incorporated or Qualified 10/27/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0531189 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Zip Country Country Zip This corporation owes or has paid the current year Intangible 30 Yes 29 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MEROLA, JAMES R 11380 PROSPERITY FARMS RD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 204 83 PALM BEACH GARDENS FL 33410 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable hen reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (10/97 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE STRONG, CAROLYN R NAME 1.2 NAME CR2E034 12670 170TH RD. N.W. STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ■ Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE

14. I 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 supplied ental angual report of 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 receive or truste on the corporation of the corporation or the receive of the corporation of

52 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

-----i

**FILED** 

eutime Phone # 03142

Change

Addition