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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P94000081008 (2) DOCUMENT #

WOODSTONE HOMES, INC.

Principal Place of Business	Mailing Addres
715 KUHL AVE	715 KUHL AVE
ORLANDO FL 32801	ORLANDO FL

FILED May 14 1998 8:00am Secretary of State



32801 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1994 2a. Mailing Address 2. Principal Place of Business Applied For 59-3307094 Not Applicable 26 P.O. Box 817 001 Oscoola Ave Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Winter Park, FL. 23 Winter Park, Trust Fund Contribution Added to Fees FLCountry 8. This corporation owes or has paid the current year Intangible 25 USA 2932790 — 9. Name and Address of Current Registered Agent Yes 24 32789 2932790-0817 30 ΠNο USA Personal Property Tax due June 30. Name and Address of New Registered Agent 81 GLASSEY, CHERYL K 715 KUHL AVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tile if applicable (NOTE: Rog stered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1.1 TITLE **GLASSEY, CHERLY K** NAME 1.2 NAME 1001 OSCEOLA AVE. STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **GLASSEY, JOHN R** NAME 2.2 NAME 1001 OSCOLA AVE STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL 32789 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE Addition 3.1 THEE TITLE KELLY, KARIN L NAME 3.2 NAME 643 PALM BAY COURT #105 STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32825 3.4. CITY-ST-ZIP CITY-ST-ZIP X DELETE Addition TITLE 4.1 TITLE Change NAME HASTINGS, KEITH E 4 2 NAME 806 RIVER COVE AVE. STREET ADDRESS 4.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 4.4 CITY-\$1-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP Addition DELETE Change TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 armual 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 truslee 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 attachment with an address.