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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

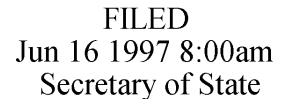
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000014636 (1)

SIMPLIFIED HOUSEING, INC.

| Principal | Place of | Business |
|-----------|----------|----------|





| Principal Place of Business Mailing Address |   |   |  |   | t 18811881 tië 1646) atter antri antri antri antri antri atte atte atte atte atte atte |            |                              |   |                                |                        |                                |  |
|---|---|---|--|---|--|------------|------------------------------|---|--------------------------------|------------------------|--------------------------------|--|
| 1671 OAKHURS<br>WINTER PARK                 |   | 1671 OAKHURST AVE<br>WINTER PARK FL 32789-2746                    |  |   |  |            |                              |   |                                |                        |                                |  |
|   |   |   |  |   |  |            | 1                            | 3. Date incorporated or Qualified 3a. Date of Last Ro 02/20/1995 03/14/1996 |                                |                        |                                |  |
| 2. Principal Pl                             | ace of Business   | 2a. Mailing   | Address  |   |  |            | 4. FEI Nur                   |   |                                |                        | pplied For                     |  |
| 21  |   | 26  | 26   |   |  |            | <b>59-3304629</b> Not Applic |   |                                |                        | ot Applicable                  |  |
| Sulte, Apt. (                               | #, etc.   | <u></u> ├── `   | Suite, Apt. #, etc.                                |   |  |            | 6. Certifica                 | ate of Status Desired   | \$8.75 Additional Fee Required |                        |                                |  |
| City & State                                | 9   | City &  | State  |   |  |            | 6. Election                  | Campaign Financing  |                                | \$5.00                 | May Be                         |  |
| 23  |   | 28  |  |   |  |            | 1                            | ind Contribution  |                                |                        | to Fees                        |  |
| Zip   | Country   | Zip   |  | Cour                                      | ntry   |            | 8. This co                   | poration has liability for  | intangible t                   | ax under s             | s. 199.032,                    |  |
| 24  | 25  | 29  |  | 30  |  |            |                              |   |                                | No                     |                                |  |
|   | 9. Name and Address of Curr   | ent Registered A  | gent   |   |  |            |                              | and Address of New R  | egistered A                    | gent                   |                                |  |
| TAY   | LOR, JAMES R  |   |  |   | 81   | Name 5     | anes                         |   |                                |                        |                                |  |
| 1871  | OAKHURST AVE  |   |  | ł   | 82   | Street Add | ress (P.O. Box               | Number is Not Accepta   | ible)                          |                        |                                |  |
|   | TER PARK FL 32789   |   |  |   |  | 52         | 0 174                        | Number is Not Accepta   | x re                           |                        |                                |  |
| *****                                       |   |   |  |   | B3   | bu         |                              |   |                                |                        |                                |  |
|   |   |   |  | •   | 84   | City       |                              | 0   |                                | 85 Zip                 | Code                           |  |
|   |   |   |  |   | "  | ั" ท       | ハハセト                         | Park  | FL                             | 3                      | 2769                           |  |
| 11. Pursuant to office or reagent. La       | to the provisions of Sections 607.0<br>egistered agent, or both, in the Sta<br>m familiar with, and accept the ob | 502 and 607.1508<br>ite of Florida. Such<br>ligations of, Section | l, Florida Statu<br>n change was<br>in 607.0505, F | iles, the ab<br>authorized<br>lorida Stal | ove-<br>d by t<br>utos.  | marcad age | anentina nuberi              | in this atotomicat for the  | purpose of o<br>ept the appo   | changing<br>intment as | its registered<br>s registered |  |
| SIGNATURE                                   | Signature, typed or printed name of registered  |   |  |   |  |            | ired when reinstating        |   | DATE                           |                        |                                |  |
| 12.   |   | ND DIRECTORS  |  | 13.                                       |  |            |                              | NS/CHANGES TO OFF   | CERS AND                       | DIRECTO                | RS IN 12                       |  |
| TITLE                                       | D   |   | DELFTE   | 1,1 10                                    | [LF  |            |                              |   |                                | Change                 | Addition                       |  |
| NAME  | TAYLOR, JAMES R   |   |  | 1.2 NA                                    | ME   |            |                              |   |                                |                        |                                |  |
| STREET ADDRESS                              | 1671 OAKHURST AVE   |   |  | 1.3 \$1                                   | REELA  | DDRESS     |                              |   |                                |                        |                                |  |
| CITY-ST-ZIP                                 | WINTER PARK FL 32789  |   |  | 1.4 00                                    | IY-ST-   | ZIP        |                              |   |                                |                        |                                |  |
| TITLE                                       | D   |   | DELETE   | 21 TII                                    |  |            |                              |   | l                              | Change                 | ☐ Addition                     |  |
| NAME  | STANLEY, SUSAN W  |   |  | 22 NA                                     | AME  |            |                              |   |                                |                        |                                |  |
| STOCKE LOOPECS                              | 1871 OAKHURST AVE   |   |  | 2.3 ST                                    | REET A   | DDRESS     |                              |   |                                |                        |                                |  |
| CITY-ST-ZIP                                 | WINTER PARK FL 32789  |   |  | 2 4 0                                     | ITY-\$1  | - 7IP      |                              |   |                                |                        |                                |  |
| TITLE                                       | ***************************************   |   | DELETE   | 3.1 TIT                                   |  |            |                              |   |                                | Change                 | Addition                       |  |
| NAME .                                      |   |   |  | 3.2 N/                                    | \ME  |            |                              |   |                                |                        |                                |  |
| STREET ADDRESS                              |   |   | •  | 3.3 \$1                                   | REETA  | DDRESS     |                              |   |                                |                        |                                |  |
| CITY - ST - 7IP                             |   |   |  | 3.4. C                                    | ITY-ST   | -7IP       |                              |   |                                |                        |                                |  |
| TITLE                                       |   |   | DELETE   | 4.1 10                                    |  |            |                              |   |                                | Change                 | Addition                       |  |
| NAME  |   |   |  | 4. 2 N                                    | AME  |            |                              |   |                                |                        |                                |  |
| STREET ADDRESS                              |   |   |  | 4.3 ST                                    | REET A   | DORESS     |                              |   |                                |                        |                                |  |
| CITY-ST-ZIP                                 |   |   |  | 4.4 Ci                                    | IY-ST  | - 7(P      |                              |   |                                |                        |                                |  |
| TITLE                                       |   |   | DELETE   | 5.1 1                                     |  |            |                              |   |                                | Change                 | Addition                       |  |
| NAME  |   |   |  | 5.2 NA                                    | 4ME  |            |                              |   |                                |                        |                                |  |
| STREET ADDRESS                              |   |   |  | 5.3 \$1                                   | IREET A  | DDRESS     |                              |   |                                |                        |                                |  |
| CITY-ST-ZIP                                 |   |   | •  |   | 1Y-\$F   |            |                              |   |                                |                        |                                |  |
| TITLE                                       |   |   | DELETE   | 61 10                                     |  |            |                              |   |                                | Change                 | Addition                       |  |
| NAME  |   |   |  | 62 N/                                     | AME  |            |                              |   |                                |                        |                                |  |
| STREET ADDRESS                              |   |   |  |   |  | LDDRESS .  |                              |   |                                |                        |                                |  |
| CiTY-ST-ZiP                                 |   |   |  |   | 1Y- ST   | 1          |                              |   |                                |                        |                                |  |
| A11.1 A1.244                                |   |   |  |   |  |            |                              |   |                                |                        |                                |  |

I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address.