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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000019646 (5)

FILED
May 29 1998 8:00am
Secretary of State

| WASH | IAW HOMES, INC. | , , | | ; | |
|--|---|---|--|--|--|
| Principal Plac | ce of Business | Mailing Address | · | | DING DONOT HOUSE PARKE OFFICE BARK CORF |
| 7081 SHADY GROVE WAY TALLAHASSEE FL 32312 | | 5290 ST IVES LANE TALLAHASSEE FL 32308 US | | DO NOT WRITE IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified | |
| 9 Principal E | Place of Business | 2a. Mailing Address | | 03/10/1995 4. FEI Number | Armlind For |
| 21 | | 26 7061 Shady | DECOME 1/ DELL | 59-3346156 | Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Grane room | | \$9.75 Additional |
| 22 | | | | 5. Certificate of Status Desired | Fee Required |
| City & State | | 28 Gity & State 28 14 14 15 26 | · =/ | 8. Election Campaign Financing | \$5.00 May Be |
| 23 | | | | Trust Fund Contribution | Added to Fees |
| Zíp | Country | ^{Zip} 3231a 3 | Country Lean | 8. This corporation owes or has pa | 1 |
| 24 | 25 9. Name and Address of Curre | | 10 Leon | Personal Property Tax due June 10. Name and Address of New Re | |
| Qi | | Trogratorou Agont | 81 Name4 | A . | Sictorial Page 1 |
| Only to A | | | | ·A. Shaw | |
| | AVANA FL 32333 | | Street Address (P.O. Box Number is Not Acceptable) | | |
| 1 | ATTACK TE GEGGG | | [83] | Olivie www | |
| | • | | Q | | |
| • | | | 84 - 42 11 | ahassee. | FL B Zip Code 32312 |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Statutes | the above-named of | cornoration submits this statement for the r | urpose of changing its registered |
| office or t | registered agent, or both, in the Stat | e of Florida. Such change was au | thorized by the corporate | oration's board of directors. I hereby accep | of the appointment as registered |
| | 7,941 5, = | - President | Cid Cidialos. | | 5-4-98 |
| SIGNATURE | Signature, Wood or pentity harne of registered ag | gont and tale if applicable (NOTE | Registered Agent signature r | required when reinstating) | DATE |
| 12. | OFFICERS AF | VD DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | |
| TITLE | P | ☐ DE le te | | President | Change Addition |
| NAME | SHAW, W A | | 12 NAME | W.A. Shaw | |
| STREET ADDRESS | ROUTE 1 BOX 2793-A | | 1.3 STREET ADDRESS | 7061 Shady Grove Way | |
| CITY-ST-ZIP | HAVANA FL | T Constant | 1.4 CITY - ST - ZIP | Tall. FL Sabia | 200 |
| TITLE | V AFFANO DADVI A | DELETE | | Vice-fresident | Change Addition |
| NAME | MEANS, DARYL A | | 2.2 NAME | Dary A. Means | Danne |
| STREET ADDRESS | 2467 VICEROY COURT | | | ayou Vicerou Court | |
| CITY-ST-ZIP | TALLAHASSEE FL ST | The rec | 2. 4 C/TY - ST - Z/P | Tall, FL 3a31a | Change Addition |
| TITLE | SHAW, SANDRA E. | ☐ DELETE | | ST' | M change in Addition |
| NAME | RT 1, BOX 2793-A | | 3.2 NAME | Sandra E. Shaw 7061 Shady Grove Way | |
| STREET ADDRESS | HAVANA FL | | | | |
| CITY-ST-ZIP TITLE | INTO I L | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | Tall, FL 32312 | Change Addition |
| NAME | Ì | Decere | 4. 2 NAME | | The Control of the Co |
| STREET ADDRESS | | | 4.2 NAME 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | ; |
| TITLE | | DELETE | 5.1 THILE | | ☐ Change ☐ Addition |
| NAME | | L., | 5.2 NAME | والجرار المساق والمدر والساق وللمان والمدو والمدو والمدو | — · · · — |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | 60000254 3 -06/02/980101 | ごせせい 9016 |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | *** <u>#\$60</u> .00 | u uxu |
| TITLE | | DELETE | 6.1 TITLE | ************************************** | Change Addition |
| NAME | | | 6.2 NAME | · | · W |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |)`& \ & |
| CITY-ST-ZIP | 1 | | 6.4 CITY - ST - ZIP | | 2 1 /F |

14. 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 changed, or on an attachment with an address.

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Prox. D. at

5-4-98

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