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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 14 1997 8:00am

Secretary of State

3-10-97

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000041277 (1)

PREFERRED HOMES OF PINELLAS INC.

Principal Plac	e or Business	Mailing Adoress	360 WELLINGTON AVENUE OLDSMAR FL 34677-4005				,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
380 WELLINGTO OLDSMAR FL 3									
						3. Date Incorporated or Qualified 05/22/1995	ι	e of Last R 7/1996	eport
2. Principal P	lace of Business	2a, Mailing Addr	ess			4. FEI Number		Ar	oplied For
21		26			59-3324646	No	ot Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			- 0-1%-1-164-1-0-164		\$8.75	Additional	
22		27				5. Certificate of Status Desired	لــا	Fee Re	equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution			to Fees	
Zip	Country	Country 7ip C		Country		8. This corporation has liability for in	ntangible t	ax under s	199.032
24	25	29	30					No	
	9. Name and Address of Curre	nt Registered Agent		I		10, Name and Address of New Reg	jistered A	genl	
HOC	XH, JANELLE (JILL) C			81	Name				i
360	WELLINGTON AVENUE					Street Address (P.O. Box Number is Not Acceptable)			
OLD	SMAR FL 34677								
				83					
				-				T	01
				84	City		FL	85 Zip (Code
office or r	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such chari	ge was authorize	od by	vithe corpora	rporation submits this statement for the parties alon's board of directors. I hereby accept	urpose of c I the appo	changing it intraent as	s registered registered
SIGNATURE	Signature, typed or printed name of registered age	ord mod title if anythropide	(NOV. Desistar	od Ano	onle acception roa	ulred wher reinstating)	DATE		
12.		D DIRECTORS	13.		··· squatare req	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	P	□ DE				7,007,101,0,07,11,020,10,01,10		Change	Addition
NAME	HOCH, JANELLE (JILL) C			IAME					
STREET ADDRESS	360 WELLINGTON AVENUE		l "		ADDRESS				ļ
CITY-ST-ZIP	OLDSMAR FL 34677				31 - 7IP				į.
TITLE	OLDOWALT E OTOT	DE) - (IF			Change	Addition
NAME			221				_		
STREET ADDRESS					ADDRESS				ļ
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CITY-ST-ZIP TITLE		□ DE			S1-ZIP			Change	Addition
NAME	li.		32 N				L	change	
STREET ADDRESS					ADDRESS				ļ
CITY-ST-ZIP TITLE		3d 🔲			\$1 - ZIP		г	Change	Addition
			1	NAME				online	- Moniton
NAME					44-bbsha				
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CITY-ST-ZIP		DE DE			IT-7IP			Change	Addition
TITLE		LJIR	1 ···				L	change	Moortion [
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				11Y-S	1- ZIP				
TITLE		DE	1		Ì		L	Change	Addition
NAME			62 N	IAME	ľ				

14. 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 eath; 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.