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 # P95000061056 (4)

HUMMERT HOMES, INC.

CITY-ST-ZIP

Principal Place of Business Mailing Address 4390 HYPOLUXO ROAD STE 114 4390 HYPOLUXO ROAD STE 114 LANTANA FL 33462-3412 LANTANA FL 33462 3. Date Incorporated or Qualified 3a. Date of Last Report 08/07/1995 04/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 65-0603282 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KANOUSE, KEITH J 2424 NO. FEDERAL HIGHWAY STE 353 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6)DELETE Change Addition TITLE 1.1 TITLE HUMMERT, AUGUST H IV 1.2 NAME NAME 4390 HYPOLUXO ROAD STE 114 1.3 STREET ADDRESS STREET ADDRESS LANTANA FL 33462 CITY-ST-7P 1.4 CITY - \$1 - ZIP Change Addition DELFTE 2.1 TITLE TITLE HUMMERT. KIM E NAME 4390 HYPOLUXO ROAD STE 114 STREET ADDRESS 2.3 STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP 2. 4 CITY-ST-ZIP 🔲 DELETË Change Addition 3.1 1171.5 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3,4. CHY-\$1-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TIME 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition 5 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5 4 CHTY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 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

an httachment with an address.

4/25/97 501.964.460

FILED

May 02 1997 8:00am

Secretary of State