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 # P95000068406 (4)

FILED Apr 23 1998 8:00am Secretary of State

1. Corporatio		(.,	•		
THE H	OUSE PROS, INC.				
					18 BHR 1914 BH BH 1814 BH 1814
Principal Plac	e of Business	Mailing Address			HA DINGA FORMA BIRNY BRINA DINA 1681
*					
1631 PICADILLY DR 1631 PICADILLT DR DAYTONA BEACH FL 32117 DAYTONA BEACH FL 32117			117		
US		US		DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
				09/01/1995	
	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
1631	Piccadilly DR	26 1631 PICC	adılly Dr.	59-3337853	Not Applicable
Suite, Apt	#, etc	Suite, Apt. # etc.		5. Certificate of Status Desired	\$8.75 Additional
2		27		g, germanic of change personal	Fee Required
City & Stat	ce .	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	a. This corporation owes or has paid the	
4	[25]	[29]	30	Personal Property Tax due June 30	Yes No
	g. Name and Address of Currer	ni Hegistered Agent	81 Name	10. Name and Address of New Registe	ered Agent
MILDON, CANFIELD F					
	27 ALICE DR.		82 Street Add	lress (P.O. Box Number is Not Acceptable)	
DA	YTONA BEACH FL 32117		163	1 Piccadilly DR	
			83	•	
			84 City		85 Zip Code
				170Na Beach	FL 32117
11. Pursuant	to the provisions of Sections 607 050	02 and 607 1508, Florida Statu	ites, the above-named cor	poration submits this statement for the purpo	se of changing its registered
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	eof Florida. Such change was latious of Section 607.0505. F	authorized by the corpora lorida Statutes	ition's board of directors. I hereby accept the	appointment as registered
SIGNATURE	The court of the c	, 1000 or, 5000 or 651.0500, 1	·		
SIGNATURE	Signature, type-dior pointers committee ontened age	ent aust lise if applicable (NO	IL Hegistored Agent signature requ	ired when reinstating) Dr	MF
12.	OFFICERS AN	ID DIBLCTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	 	Change Addition
NAME	WILSON, GARFIELD P		1.2 NAME		
STREET ADURESS	1631 PICADILLY DR		1.3 STREET ADDRESS	631 Piccadilly DR	
CITY-ST Z#P	DAYTONA BEACH FL		1.4 CITY-ST-ZIP	•	
TITLE	D	DELETE	2 1 TITLE		Change Addition
NAME	CROUTHAMEL, CHARLES F	_	2.2 NAME	_	
STREET ADDRESS	1631 PICADILLY DR		2 3 STREET ADDRESS	63, Piccadilly DR	
CITY - ST - ZIP	PORT ORANGE FL			•	
TITLE	TOM OTHERS	DILETE	2 4 CITY-ST-7IP		Change Addition
NAME		Ottin	3 2 NAME		[_] ondings Matataon
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - 7IP		DELFTE	34 CHY-ST-ZIP		Change Addition
THILE			41 TITLE		
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T for eve	4.4 CHY-ST-7IP		T 05
TITLE		L_J DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
urt		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADURESS			6.3 STHEET ADDRESS		
			C 4 0 1 1 0 1 1 0		
CITY-ST-ZIP			64 CHY-ST-ZIP		

14. It 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.

SIGNATURE: Gald P. W. L. Garfield P Wilson 4/16/98 904-238-5134