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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000087377 (4)

1. Corporation Name

SUMMERLAND HOMES, INC.



Principal Place of Business

Mailing Address

5401 KIRKMAN  
SUITE 725  
ORLANDO FL 32819

5401 KIRKMAN  
SUITE 725  
ORLANDO FL 32819

3. Date Incorporated or Qualified  
11/14/1995

3a. Date of Last Report  
first

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KHATIB, RASHID A  
5401 KIRKMAN  
SUITE 725  
ORLANDO FL 32819

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name, change in signature, if applicable

Typed Registered Agent's signature required when registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME KHOURI, ZAH W  
STREET ADDRESS 5401 KIRKMAN ROAD, SUITE 725  
CITY-ST-ZIP ORLANDO FL 32819

TITLE D  
NAME KHATIB, RASHID A  
STREET ADDRESS 5401 KIRKMAN ROAD, SUITE 725  
CITY-ST-ZIP ORLANDO FL 32819

TITLE D  
NAME JAMMAL, S. E  
STREET ADDRESS 5401 KIRKMAN ROAD, SUITE 725  
CITY-ST-ZIP ORLANDO FL 32819

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY-ST-ZIP

2. TITLE  
2. NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3. TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4. TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5. TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6. TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rashid A. Khatib

4-3-96

407-354-2200

CR2E034 (12/95)