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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

THILE

NAME

STREET ACORESS

SIGNATURE:

CITY - ST- 7/2

POCUMENT # P95000092953 (5)

HAILE PLANTATION COMMUNITY MANAGEMENT, INC.

Principal Place of Business Mailing Address 5300 SW 91ST TERRACE 5300 SW 91ST TERRACE GAINESVILLE FL 32608-7124 GAINESVILLE FL 32608-7124 3. Date Incorporated or Qualified 3a. Date of Last Report 12/05/1995 02/15/1996 2a. Mailing Address 2. Principal Place of Business FEI Number Applied For 5330 SW 91 ST TERRALE 26 5330 SW 91 TERRACE 59-3352668 Not Applicable Suite, Apt. # leta. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be GAINESVILLE GAINESVILLE Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, UGA 32608 Yes No Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SALTER, JAMES D RICK MEDINA 703 NE FIRST STREET Street Address (P.O. Box Number is Not Acceptable) 82 GAINESVILLE FL 32601 83 Zip Code 32608 84 GAINESULLE 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 Torida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lain farfilliar with, and accept his obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent algoriture required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition MrE SALTER, JAMES D HAME **1.2 NAME** 703 NE FIRST STREET STREET ADDRESS 1.3 STREET ADDRESS CHTY - \$1 - 74P Gainesville FL 32601 1.4 CITY - ST- ZIP DELETE 2.1 TITLE WILLIAM WOLKING Change X Addition HILE BRANDON, MARTHA L NAME 2.2 NAME 5153 SW 88 TERRACE T STREET ACIDRESS 5205-SW-86TH-TERRACE 2.3 STREET ADDRESS GAINESVILLE 32608 GAINESVILLE FL 82606 2. 4 CITY - ST - ZIP CITY ST-79 DELETE Addition HUE 3.1 TITLE Change Kramer, Robert B NAME 3.2 NAME STREET AUDRESS 9404 SW 53RD LANE 3.3 STREET ADDRESS CHY-ST-ZIP Gainesville FL 32608 3.4. CITY - ST- ZIP DELETE TIT_E 411006 Change Addition NAME Jones, John E 4. 2 NAME JOHN E JONES STREET ADDRESS 9831 SW 55TH ROAD 4.3 STREET ADDRESS 9831 SW 55 **GAINESVILLE FL 32608** CITY - \$1 - 7(F) 4.4 CITY - ST- ZIP DELETE ш, 5.1 TITLE Change Addition NAME Cooper, Cleve 5.2 NAME 5610 SW 88TH COURT STREET A TORESS 5.3 STREET ADDRESS GAINESVILLE FL 32608 5.4 CITY - ST - ZIP CITY-ST-7.2

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED Mar 10 1997 8:00am Secretary of State

Change

Addition

