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

PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Apr 28 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000093846 (0)

IH BRANDON HOMES, INC.

Principal Place of Business  8401 JR MANOR DRIVE SUITE 100 TAMPA FL 33634  2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State		Mailing Address  8401 JR MANOR DRIVE SUITE 100 TAMPA FL 33634-1400  28. Mailing Address 26 Suite, Apt. #, etc. 27		<b>4</b> 5	3. Date Incorporated or Qualified 12/11/1995 07/02/1996  4. FEI Number Applied For Not Applicable For S9-3372656 Not Applicable Fee Required  5. Certificate of Status Desired \$8.75 Additional Fee Required  6. Election Campaign Financing Trust Fund Contribution Added to Fees					
Zip	Country				Country 8. This corporation h			intangible		
24	25	25 29 30					Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent	81			10	), Name and Address of New Re	glstered	Agent	
WALTON H MCMICHEAL					Name					
8401 JU MANOR DRIVE			82	82 Syngal Address			P.O. Box Number is Not Acceptate	ple)		
	TE 200		83	+	8401		.K. MANOR UKIV	<u>e</u>		
TAM	IPA FL 33602		0.0	3						
			84	1	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607 1508 Florida Statu	ites the abov	<u>_</u>	na hamen-	rporali	on submits this statement for the r		4 changing	de regislered
office or r	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was	authorized b	ו ענ	the corpora	ation's	board of directors. I hereby accep	pt the app	pointment a	is registered
	атт тапшаг witis, ало ассерт tiic ослуа	tions or, Section our Joos, in	Office Statute	35.						
SIGNATURE	Signature, lyped or printed name of registered agen	at and titic if applicable (NO)	TE: Registered Ag	gent	nt signature requ	uired whe	en reinstating)	DATE	<del></del>	
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE			7			Change	Addition
NAME :	SUAREZ, JACK D		1.2 NAME			•				
STREET ADDRESS	8401 JR MANOR DRIVE, SUITE	100	1.3 STREE	I A	ADDRESS					
CITY-ST-ZIP	TAMPA FL 33634	DE DELETE	1.4 CITY -	_	- ZIP					
TITLE	D MONTO MADE MANAGEMENT	☐ DELETE	2.1 TITLE			5			Change	Addition
NAME	MCMICHAEL, WALTON H	400	2.2 NAME							
STREET ADDRESS	8401 JR MANOR DRIVE, SUITE	100	2.3 STREE							
CITY-ST-ZIP TITLE	TAMPA FL 33634	DELETE	2 4 CITY-		I-ZIP				Change	Addition
NAME			31 TITLE						L_1 Gridings	LJ Augition
STREET ADDRESS			3.2 NAME		Annareg					
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CITY-ST-ZIP TITLE	<u> </u>	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		- ZIP				Change	Addition
NAME	1	<del>-</del>	4. 2 NAME							
STREET ADDRESS			4.3 STREE		ADDRESS					
CITY-ST-ZIP	1		4.4 CITY-		ľ					
TITLE	1	DELETE	5.1 TITLE						Change	Addition
NAME	1		5.2 NAME							
STREET ADDRESS	[		5.3 STREE	A E	ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-	- 2IP					
TITLE		DECETE	6.1 TITLE						Change	Addition
NAME			6.2 NAME							
STREET ADDRESS	1		63 STREE	1 A	ADDRESS					
CITY-ST-ZIP	1 1	-/ A-	6.4 CITY-1					<del></del>		<del></del>
information I am an o	by certify that the informatic subplied on indicated on this annual rippt to sub officer or director of the columnion or in Block 12 or Block 3 it manged, or	with this filling does not quali uppremental annual leport is the receiver or trustile empoy or, an attachment with an ad	Ify for the ex- true and acc wered to exe ldress.	en Suri Icu	nption state rate and tha ute this repa	at my s ort as r	icction 119.07(3)(i), Florida Statute signature shall have the same lega required by Chapter 607, Florida S	is. I turine al effect as Statutes; a	r certify trials if made uiting that my	if the rider eath; that name