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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093851 (0)

IH MELBOURNE HOMES, INC.

14. I do hereby certify that the information supplied winformation indicated on this actival report of surfam an officer or director in yie phriporation or the

Principal Pino	o of Puriners	Mailing Address			_				
Principal Place of Business 8401 JR MANOR DRIVE SUITE 100 TAMPA FL 33634		8401 JR MANOR DRIVE SUITE 100 TAMPA FL 33634-1400							
						te Incorporated 11/1995	or Qualified	3a. Date of Last 07/02/1996	Report
2. Principal P	lace of Businoss	2a. Mailing Addre	ess			Number		A	pplied For
21		26			59	3367625			lot Applicable
Sulte, Apt.	#, etc.	<u></u> ⊢	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required			
City & State	6	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28				st Fund Contribi			May Be I to Fees
Zip	Country	Zip	Count	ry	8. Thi	s corporation ha	s liability for in	nixingible tax under	· · · · · · · · · · · · · · · · · · ·
24	25	29	30		Flo	rida Statutes	<u> </u>	Yes No	
	9, Name and Address of Currer	nt Registered Agent			10. Na	me and Addres	s of New Reg	gistered Agent	
	IICHAEL, WALTON H		8	1 Name					
	J R MANOR DRIVE, SUITE 200		8	82 Street Ad		Box Number is f	Not Acceptabl	le)	
	E 1400 PA FL 33634		8	3 1.21	-	Cilto	11/10		
1 AMI	FA FE 33034			DEC	616	SUITE	1400		
·			8	4 City				FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florid	a Statutes, the abo	I ve-named cor	rporation su	bmits this stater	nent for the p		its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such chang ations of Section 607.0	je was authorized l 0505. Florida Statut	by the corpora	ation's boar	d of directors T	nereby accep	t the appointment a	s registered
SIGNATURE	and decopy me cong								
	Signature, typed or printed name of registered age		(NOTE: Registered A	gent signature requ				DATE	
12,	OFFICERS AN	D DIRECTORS	13.		ADD	ITIONS/CHANG	ES TO OFFIC	ERS AND DIRECTO	
TITLE	SUAREZ, JACK D	□ bei	- 1		$\boldsymbol{\rho}$			J Change	M Addition
NAME STREET ADDRESS	8401 JR MANOR DRIVE, SUITE	100	1,2 NAM						
CITY-ST-ZIP	TAMPA FL 33634	. 100	1.3 S I R 1.4 C I I Y	E1 ADDRESS					
TITLE	D	DEL			5			Change	Addition
NAME	MCMICHAEL, WALTON H		2.2 NAM		>				•••
STREET ADDRESS	8401 JR MANOR DRIVE, SUITE	100		ET ADDRESS					
CITY-ST-ZIP	TAMPA FL 33634		2. 4 City	- ST - Z(P					
TITLE		DEI	.ĒTĒ 3.1 TITLE				•	Change	☐ Addition
NAME			3.2 NAM						
STREET ADDRESS			3.3 STRE	E1 ADDRESS					
CITY-ST-ZIP			3.4 CITY						
TITLE		∐ DEI						L_J Change	Addition
NAME			4. 2 NAM						
STREET ADDRESS				E1 ADDRESS					
CITY-ST-ZIP TITLE		DEL	.ETE 5.1 TITLE					Change	Addition
NAME			5.1 VIILE 5.2 NAMI					L_J Change	ווטוווטטר ג
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			5.3 STRE 5.4 CITY						
TITLE		DE						☐ Change	Addition
NAME		_	6.2 NAMI)				_ •	
STREET ADDRESS				1 ADDRESS					
CITY OF TID		\wedge 1	/) C400V	63. 210					

for qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the opport is true and accurate and that my signature shall have the same legal effect as if made under oath; that is impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name in an address.