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 # P9600001596 (1)

FILED Jan 23 1998 8:00am Secretary of State

THE H	OME ADV	ANTAGE WEST, I	INC.						
Principal Place of Business Mailing Address									I BERITARI FIO 10110 67111 68111 00111 00111 00111 00111 00101 1010 01110 01110 0
3130 63RD AVENUE E. 3130 63RD AVENUE E.									
BRADENTON FL 34203 BRADENTON FL 34203									
									DO NOT WRITE IN THIS SPACE
									3. Date Incorporated or Qualified
2. Principal Place of Business 2e. Mailing Address									12/29/1995 4. FEI Number Applied For
2. Principal Place of Business			— —	26 26					T. ippinos v. s.
Suite, Apt. #, etc.				Suite, Apt. #, etc.					65-0635423 Not Applicable \$8.75 Additional
22			<u> </u>	27					5. Certificate of Status Desired Fee Regulred
City & State				City & State					6. Election Campaign Financing \$5.00 May Be
23			28	28					Trust Fund Contribution Added to Fees
Zip	Zip Country			Zip Cour			,		8. This corporation owes or has paid the current year Intangible
24		25	29		30				Personal Property Tax due June 30. Yes No
	9, Name	and Address of Curre	nt Registered A	Agent			,		10. Name and Address of New Registered Agent
HARRELL, DONALD J						81	Nam	в	
	33 main sti					Stree	t Addre	ess (P.O. Box Number is Not Acceptable)	
SARA S OTA FL 34237									
						63	}		
						84	City		■■ 85 Zip Code
							1		
11. Pursuant	to the provision	ons of Sections 607.05 ant, or both, in the Stat	02 and 607.1506 e of Florida, Suc	8, Florida Statu th channe was	tes, the a authorize	above ad by	e-name	d corpo	oration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
agent. I a	m tamiliar wit	h, and a ccept the oblig	gations of, Section	on 607.05 0 5, Fi	orida Sta	atutes	S.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and board of chooses the copy and opposition appointment as to got to be
SIGNATURE									
12.	signature, typed o	or printed name of registered as	ND DIRECTORS	DIR (NO	13		ent signati	ire required	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDST	OTTIOETOTI	VD DIVIEOTORIO	DELETE		TITLE		T	Change Addition
NAME	,	ERG, RONALD C				NAME			
STREET ADDRESS		RD AVENUE E.					ADDRESS	:	
CITY-ST-ZIP	0040F4F044 F1 04000					1.4 CITY - ST - ZIP		´	
TITLE	VDST	<u> </u>		DELETE 2.1 TIT				+	☐ Change ☐ Addition
NAME	GREENB	urg, Susan W			2.2	NAME		1	
STREET ADDRESS		RD AVENUE E.			2.3	STREET	ADDRESS	; }	•
CITY-ST-ZIP	DO 4 DO 10 DO 4 D 4 D 4 D 4 D 4 D 4 D 4 D 4 D 4 D			2. 4 Cl			ST - ZIP		
TITLE				DELETE 3.1 TI				 	Change Addition
NAME	VAUGHT,	KIRK			3.21	NAME			
STREET ADDRESS				3.3 STF		STREET	ADDRESS	;	
CITY-ST-ZIP	BRADEN	TON FL 34203			3.4.	CITY-S	ST-ZIP		
TITLE				DELETE	4.1	TITLE			☐ Change ☐ Addition
RAME					4.2	NAME			
STREET ADDRESS	STREET ADDRESS			4.3 ST		1.3 STREET ADDRESS		;	
CITY-ST-ZIP	ST-ZIP					CITY-S	T - ZIP		
TITLE				DELETE	5.1	TITLE			☐ Change ☐ Addition
NAME					5.21	NAME			
STREET ADDRESS				5.3 STREET ADDRESS		• [
CITY-ST-ZIP			·			CITY - S	T- Z IP	- 	
TITLE				DELETE		TITLE			☐ Change ☐ Addition
NAME						NAME			
STREET ADDRESS					6.3 3	STREET	ADDRESS		
CITY-ST-ZIP	L					CITY-S			Section 119 07/3Vi) Florida Statutes I further certify that the information

14. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporations the review 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.

1/15/48/ 941-7554246