

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

(1)

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

FILED
 99 JAN -7 AM 10:30
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P96000045960
 1. Corporation Name
 SPRING HILL DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
9480 SWISS ROAD SPRING HILL, FLORIDA 34606	

700002738337-4
~~01/12/99-01069-014~~
*****315.00 ***315.00**
 DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		3. Date Incorporated or Qualified	
21	5190 26TH STREET WEST	26	5190 26TH STREET WEST	59-3380441		MAY 24, 1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For		Not Applicable	
22	SUITE E	27	SUITE E	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
23	BRADENTON, FLORIDA	28	BRADENTON FLORIDA	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
24	Zip 34207	25	Country USA	29	Zip 34207	30	Country USA

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
LOIS A. BASS 5190 26TH STREET WEST, #E BRADENTON, FL 34207				81	Name (MR) LUCIEN LATREILLE			
				82	Street Address (P.O. Box Number is Not Acceptable) 5190 26TH STREET WEST			
				83				
				84	City SUITE E BRADENTON		85	Zip Code FL 34207

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]* LUCIEN LATREILLE DATE 12/17/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PRESIDENT			11	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	LOIS A. BASS			12	NAME		
STREET ADDRESS	5190 26TH STREET WEST, SUITE E			13	STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34207			14	CITY-ST-ZIP		
TITLE	DELETED			21	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	DELETED			22	NAME		
STREET ADDRESS	DELETED			23	STREET ADDRESS		
CITY-ST-ZIP	DELETED			24	CITY-ST-ZIP		
TITLE	DELETED			31	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	DELETED			32	NAME		
STREET ADDRESS	DELETED			33	STREET ADDRESS		
CITY-ST-ZIP	DELETED			34	CITY-ST-ZIP		
TITLE	DELETED			41	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	DELETED			42	NAME		
STREET ADDRESS	DELETED			43	STREET ADDRESS		
CITY-ST-ZIP	DELETED			44	CITY-ST-ZIP		
TITLE	DELETED			51	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	DELETED			52	NAME		
STREET ADDRESS	DELETED			53	STREET ADDRESS		
CITY-ST-ZIP	DELETED			54	CITY-ST-ZIP		
TITLE	DELETED			61	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
NAME	DELETED			62	NAME		
STREET ADDRESS	DELETED			63	STREET ADDRESS		
CITY-ST-ZIP	DELETED			64	CITY-ST-ZIP		

14. I 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.

SIGNATURE: *[Signature]* Dec. 17, 1998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/96)