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Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000053151 (2)

1. Corporation Name
AMERICAN COMMUNITY DEVELOPMENT, INC.



Principal Place of Business
806 W COLUMBUS DR
TAMPA FL 33602

Mailing Address
806 W COLUMBUS DR
TAMPA FL 33602-1108

3. Date Incorporated or Qualified
06/21/1996

3a. Date of Last Report
N/A

21 2. Principal Place of Business
10936 W. 56th St.
Suite, Apt. # etc. Suite 202

26 2a. Mailing Address
10936 W 56th St
Suite, Apt. # etc. Suite 202

4. FEI Number
59-3886953

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 City & State
Temple Terrace, FL

28 City & State
Temple Terrace, FL

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 33617

29 Zip 33617

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAKER, JOHN M
806 W COLUMBUS DR
TAMPA FL 33602

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 5 rows for officers and directors. Row 1: President Bob F. Owen, 10936 W. 56th St, Suite 202, Temple Terrace, FL 33617.

Table with 6 rows for additions/changes to officers and directors. All cells are empty.

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 register 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] 4-19-97 3-25-97 980-2851
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)