

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

FILED

**Feb 17 1998 8:00am
Secretary of State**

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

DOCUMENT # P96000054667 (6)
1. Corporation Name
CORIAL HOMES, INC.



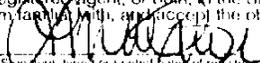
Principal Place of Business 13922 58TH ST N CLEARWATER FL 34620	Mailing Address 13922 58TH ST N CLEARWATER FL 34620
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/01/1996	
21	22	26	27	4. FEI Number APPLIED FOR	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For	
City & State		City & State		Not Applicable	
23	24	28	29	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
33760		33760		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RUTENBERG, ARTHUR 13922 58TH ST N CLEARWATER FL 34620				10. Name and Address of New Registered Agent			
				81	Name Lori Garton		
				82	Street Address (P.O. Box Number is Not Acceptable) 13922 58th Street North		
				83			
				84	City Clearwater	FL	85 Zip Code 33780

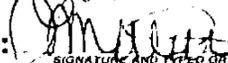
11. Pursuant to the provisions of Sections 607.0412 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

SIGNATURE:  /Lori Garton, Secretary DATE: **1/12/98**

Signature typed or printed form for the above agent and filed as applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUTENBERG, JANE B		1.2 NAME		
STREET ADDRESS	13922 58TH ST N		1.3 STREET ADDRESS		
CITY - ST - ZIP	CLEARWATER FL 34620		1.4 CITY - ST - ZIP		
TITLE	P	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUTENBERG, ARTHUR		2.2 NAME		
STREET ADDRESS	13922 58TH ST N		2.3 STREET ADDRESS		
CITY - ST - ZIP	CLEARWATER FL		2.4 CITY - ST - ZIP		
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GARTON, LORI A		3.2 NAME		
STREET ADDRESS	13922 58TH ST N		3.3 STREET ADDRESS		
CITY - ST - ZIP	CLEARWATER FL		3.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 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:  /Lori Garton, Secretary DATE: **1/12/98** 813 536-5900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone # 0398744

CR2E034 (10/97)