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 # P96000060771 (8)

ROSE BAY HOMES, INC.

FILED Apr 06 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		* Healisat tie land Billi sallt astil sallt sallt åtilt 1881/ 1881/ 1881
362 GULF BREEZE PKWAY		OCE CULF BREEZE PKWAY 7 56 T. 03.00 Rd		na lu
125		OULF BREEZE FL 32561 V ENICE TO		DO NOT INDITE IN THE PRACE
GULF BREEZE FL 32561 US		US.		A Data language of a Data Control of the Control of
			34%	¹ 3. Date incorporated or Qualified 07/19/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26 756 Trasan	s Road	59-3396104 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		S8 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28 Venice , FL	•	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 S. Name and Address of Current		0	Personal Property Tax due June 30. 🕍 Yes 🔲 No
	10. Name and Address of New Registered Agent			
ROBERTS, DONNA M CENTER 81 Name				
ROBERTS, DONNA M 1531 S. TOMIAMI, TR., #7028 153 (生りて)			82 Street	t Address (P.O. Box Number is Not Acceptable)
VENIO FL 34282				3 Center Road
\ \v'	FW)(E		83	
			84 City •	Nanica B5 Zip Code
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, typed or printed name of registered agent and title if applicable. (No				re-required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	ROHL, DONALD H	DELETE	1 1 TITLE	Change Addition
NAME	362 GULF BREEZE PKWAY SU	ITTE 405	1.2 NAME	
STREET ADDRESS	GULF BREEZE FL	115 129	1.3 STHEET ADDRESS	
CITY-ST-ZIP	SID	Doctor	1.4 CITY-ST-ZIP	
TITLE	ROLL, DONNA R	☐ DELETE	2.1 TITLE	Change Addition
NAME	756 TROJON RD.		2.2 NAME	756 Trojan Rd
STREET ADDRESS	VENIU FL		2.3 STREET ADDRESS	
CITY-ST-ZIP	VPD VPD	T britte	2. 4 CITY-ST-ZIP	Venice, Fr 3420
TITLE	ROLL, CHARLES W	☐ DELETE	3.1 TITLE	P, D Mange Addition
NAME	766 TROJON RD		3.2 NAME	
STREET ADDRESS	VENIU FL		3.3 STREET ADDRESS	756 Trosan Rd Venice FL 34293
CITY-ST-ZIP	AEIAIO LE	——————————————————————————————————————	3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		Deceme	4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	L Change L Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		T priere	5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	L_ Change
NAME			6.2 NAME	
STREET ADORESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	orlife that the information and the information	Abla (illandana da esta de est	6.4 CITY - ST - ZIP	1.00
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 eath; 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.				
DIOON 12 C	A GA		(0 -	
Charles Hall Walker Jack Land Land				