

2-13-98 B f999C-  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000067023 (7)

1. Corporation Name  
SILVER KING HOMES, INC.

Principal Place of Business  
10714 FLORENCE  
THONOTOSASSA FL 33592

Mailing Address  
10714 FLORENCE  
THONOTOSASSA FL 33592



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		08/13/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0690089	
24 Country		29 Country		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				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		10. Name and Address of New Registered Agent	
TOMLINSON, JEFF 10714 FLORENCE THONOTOSASSA FL 33592		81 Name TODD TOMLINSON	
		82 Street Address (P.O. Box Number is Not Acceptable) 3014 PEMBERTON TRACE	
		83	
		84 City PLANT CITY FL 85 Zip Code 33565	

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: 1-23-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
XX DELETE		XX Change <input type="checkbox"/> Addition	
TITLE	PD	1.1 TITLE	PRESIDENT
NAME	TOMLINSON, JEFF	1.2 NAME	TODD TOMLINSON
STREET ADDRESS	10714 FLORENCE	1.3 STREET ADDRESS	10714-B FLORENCE AVE.
CITY-ST-ZIP	THONOTOSASSA FL 33592	1.4 CITY-ST-ZIP	THONOTOSASSA, FL 33592
TITLE	VTD	2.1 TITLE	
NAME	TOMLINSON, SCOTT	2.2 NAME	
STREET ADDRESS	10714 FLORENCE	2.3 STREET ADDRESS	
CITY-ST-ZIP	THONOTOSASSA FL 33592	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	
NAME	TOMLINSON, TODD	3.2 NAME	
STREET ADDRESS	10714 FLORENCE	3.3 STREET ADDRESS	
CITY-ST-ZIP	THONOTOSASSA FL 33592	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 registered or trusted or authorized 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 if applicable, with an address.

SIGNATURE:  1-23-98

CR2E034 (10/97)