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. .FROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000073031 (2)

DREAM HOMES, INC.

**APPROVED** 

1997 APR 30 AM 11: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Base of Russiase	Mail	ing Addrage								
Principal Place of Business  5376 APPLEDORE LANE TALLAHASSEE FL 32308		Mailing Address  POST OFFICE BOX 15335  TALLAHASSEE FL 32317-5335								
						e Incorporated or /04/1996	Qualified	3a. Date	of Last Re	eporl
2. Principal Place of Business		Mailing Address				Number	<b>5 -</b> 1		Ap	plied For
21 2037 Heath					כ	4-341	204	<u> </u>		t Applicable
Suite, Apt #, etc	27	Suite, Apt #, etc.		,	5. Cert	tificate of Status D	esired		\$8.75 A Fee Re	
City & State	28	Dity & State				ction Campaign Fil st Fund Contribution	-		\$5.00 Added t	
24 32312 25	· · ·	Zip I	Country			corporation has I		tangible ta		199.032,
	29 29 29 29 29 29 29 29 29 29 29 29 29 2		30			ida Statutes ne and Address (		<u> </u>		
WINCHESTER, AL			81	Name						
-5976 APPLEDOR			82	Street Ad	idress (P.O. F	Box Number is No	Acceptab	e)	<del></del>	
TALLAHASSEE FI	<del>-92300 - \</del>			203	7 Hes	2therb	2001	<b></b>		
			83							ļ
			84	City		<del></del>		FL	85 Zin (	2962
11. Pursuant to the provision	s of Sections 607.0502 and 607	7.1508. Florida Statute	s, the above	e-named co	progration sul	omits this stateme	nt for the p	rpose of ch	nanging it	s registered
office or registered agent	, or both, in the State of Florida and accept the obligations of	<ul> <li>Such change was a</li> </ul>	uthorized by	the corpo	ration's board	of directors. I he	reby accep	t the appoir	tment as	registered
agent I am familiar with,	=,			»,						1
SIGNATURE	unted name of regulered agent and title if	applicable (NOTE	: Registered Age		quired when reinst	ating)		DATE		
SIGNATURE			: Registered Age	ent signature ter	ADD	ating) ITIONS/CHANGES	TO OFFIC		IRECTOR	S IN 12
SIGNATURII Signatore, typed or p  12.  1811 D	onted name of registered agent and little if OFFICERS AND DIRECT			ent signature ter	·		TO OFFIC	ERS AND D	IRECTOR	S IN 12
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information indicated on thi Lam an officer or director appears in Block 12 or Block powered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: (