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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1	MENT # P96000 B HOLIDAY HOMES, INC.	086474 (9))		
Principal Plac	e of Business	Mailing Address		J AMBILOON (18 1911) BUILL	
5326 COCOA COURT CAPE CORAL FL 33904		131B LAFAYETTE ST CAPE CORAL FL 33904 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				10/18/1996	
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number Applied Fo	r
21		26		65-0711898 Not Applied	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additiona	d
22 City & Stat	<u> </u>	Cily & State		Fee Required	
23	·	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. Yes No	
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
SEI	emann, ernest a esq		81 Name	III THAMACH	;
	9 DEL PRADO BOULEVARD		82 Street Ad	ILL THOMAS W. Idress (P.O. Box Number is Not Acceptable)	
CAPE CORAL FL 33904					
			83 13	18 LAFAYETTE ST.	
			84 City	85 Zip_Code	
11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, the et-					red
office or r	egistered agent, or both, in the State of	orporation submits this statement for the purpose of changing its registeration's board of directors. I hereby accept the appointment as registers	ed		
	m ternilar with, and accept the divinge	Anstal Section on Coops, c	iorida Statutes	4.29-98	
SIGNATURE	Signature typed or printed name of regels red agree	and the dapple abre (NO	IF Registered Agent signature rec		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 HTLE	Change Add	lition 1
NAME	BLECKMANN, KLAUS-GUNTER		1.2 NAME		
STREET ADDRESS	5326 COCOA COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33904	T DELETE	1.4 CITY - ST - ZIP	Chrone Add	"Alan
TITLE	O COULIAND LIDGELE	☐ DELETE	2.1 TITLE	☐ Change ☐ Add	ACHOD I
NAME PERCET ADDRESS	BLECKMANN, URSEL E		2.2 NAME		
STREET ADDRESS	5328 COCOA COURT Cape Coral Fl 33904		2.3 STREE1 ADDRESS 2. 4 CITY - S1 - ZIP		,
CITY-ST-ZIP	DAFE CORAL FL 33904	DELETE	3.1 1111.6	☐ Change ☐ Add	lition
NAME	HILL, THOMAS W		3.2 NAME	were firstly was -	11.4
STREET ADDRESS	1318 LAFAYETTE ST		3 3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Add	iition
NAME			4. 2 NAME	•	
STREET ADDRESS		e e	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Add	ilion
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	Change Add	lition
TITLE		F™ DETEK	61 TITLE	L_] Change L_] Add	IGUN
NAME CIRCULADORESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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.

4-29-98

SIGNATURE.