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

**PROFIT** CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Apr 15 1997 8:00am Secretary of State

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DOCUMENT	# P96000101661	(2)

HOME BUYERS OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 2805 D.R. BRYANT ROAD 2605 D.R. BRYANT ROAD LAKELAND FL 33810 LAKELAND FL 33810-1430 3. Date Incorporated or Qualified 3a. Date of Last Report 12/16/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 Suite Apt. #, etc Suite, Apt. #. etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zip Country 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes
Yes
No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WOODALL, E. R. 2605 D.R. BRYANT ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **LAKELAND FL 33810** 83 84 City Zip Code 85 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 furnitar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or pureful name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. resident DELETE Change Addition THUE 1.1 TITLE E. R. woodall NAME 1.2 NAME CR2E034 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-\$T-ZIP City - \$1 - 7IP Change DELETE 2.1 TITLE Addition TITLE 2.2 NAME MALE 2.3 STREET ADDRESS STREET AUDRESS 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE THEE 3.2 NAME STHEET ACCRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP COY-SI-ZII DELETE Change 4.1 10 Addition 1-111 4.2 N NAME FT ADDRESS STREET ADDRESS 4.3 ST ST-ZIP 0:1Y - S1 - 28P 4.4 C DELETE 5.1 T Change Addition 1011 5.21 NAME STEEL FADORESS 5.3 9 1 ADDRESS CHY-S1-702 5.4 ( ST-ZIP DELETE Change 611 \_\_\_ Addition Infec

6.21

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T ADDRESS

City St Zir 14. If do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and a liam an officer or director of the corporation or the receiver or trustee empowered to expense. appears in Block 12 or Block 13 if changed, or on an attachment with an address.

ST-21P emption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that ecute this report as required by Chapter 607, Florida Statutes; and that my name

NAM:

STREET ASSISTED.

ER. Woodkill RECUIRED ER. Woodall