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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra S. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## P97000044219 (8) DOCUMENT # METROPLEX HOMES, INC.

Principal Place of Business 8375 DIX ELLIS TRAIL SUITE 401 JACKSONVILLE FL 32256

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

Mailing Address

8375 DIX ELLIS TRAIL SUITE 401 JACKSONVILLE FL 32256

2s. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3449483

3. Date incorporated or Qualified 05/19/1997

5. Certificate of Status Desired

FILED						
May 01 1998 8:00am						
Secretary of State						

Applied For

\$8.75 Additional

Fee Required

\$5 00 Nov Bo

(904)464-0665

Not Applicable

City & State	0	City & St	ate			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip		Countr	У	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Age	int			10. Name and Address of New Registered Agent
CF	Vabtree, R.R.			81	Name	ө
83	75 DIX ELLIS TRAIL			82	Street	at Address (P.O. Box Number is Not Acceptable)
	NTE 401				<u> </u>	
JA	CKSONVILLE FL 32256			83	·]	
				84	City	85 Zip Code
						FL   c   2   5   5   5
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	l Florida. Such c	:hange was auti	norized b	y the con	d corporation submits this statement for the purpose of changing its registered proporation's board of directors. I hereby accept the appointment as registered
SIGNATURE						
48	Signature, typed or printed name of registered agent		(NOTE R		ent signature	ure required when reinstalling)  DATE  ADDITIONS OF TANADARY OF TA
TITLE	OFFICERS AND		DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	CRABTREE, R.R.		Decere			C Greatibe C Montifold
ľ	8375 DIX ELLIS TRAIL, STE 40	11		1.2 NAME		
STREET ADDRESS	JACKSONVILLE FL 32256	'•			T ADDRESS	?
CITY-ST-ZIP TITLE	SHOROSTVILLE TE SEESO		DELETE	1.4 CITY - 2.1 TITLE		P, D Change & Addition
NAME		L.	Jucceic	2.1 HILL 2.2 NAME		Larry R. Henson
STREET ADDRESS						
CITY-ST-ZIP				2.4 CITY		Jacksonville, FL 32256
TITLE		г	DELETE	3.1 TITLE	·3(-2)r	S, T, D Change Addition
NAME		_		3.2 NAME		James R. Catlett
STREET ADDRESS						1
CITY-ST-ZIP				3.4. CITY		Jacksonville, FL 32256
TITLE			DELETE	4.1 TITLE	<u> </u>	Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREE	T ADDRESS	
CITY-ST-ZIP				4.4 CITY-	ST-ZIP	
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREE	T ADDRESS	
CITY-ST-ZIP				5.4 CITY-	ST-ZIP	
TMLE		L	DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME	,	
STREET ADDRESS				6.3 STREE	T ADDRESS	s
CITY-ST-ZIP				6.4 CITY-	ST-ZIP	
Indicated officer or o	on this annual report or supplemental a	ennual report is er or trustee em	true and accura powered to exe	ite and ti	at my sig	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in