

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

FILED

Feb 17, 1999 8:00am
Secretary of State

02-17-1999 90087 008 ****150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000067668

1. Corporation Name
RHN COMMUNITIES, INC.

Principal Place of Business

4500 US HWY 92 E. STE 1030
LAKELAND FL 33801
US

Mailing Address

4500 US HWY 92. STE 1030
LAKELAND FL 33801
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

MURPHY, RONALD T
5015 S FLORIDA AVE
SUITE 310
LAKELAND FL 33813

3. Date Incorporated or Qualified

08/01/1997

4. FEI Number

59-3460092

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fees Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME KNAPP, RANDALL L
STREET ADDRESS 17 CASARENA CT NW
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE D
NAME KNAPP, MARVIN J
STREET ADDRESS 2003 SHORELAND DR
CITY-ST-ZIP AUBURNDALE FL 33823

TITLE D
NAME WNEK, MICHAEL E
STREET ADDRESS 526 HILLSIDE DR
CITY-ST-ZIP AUBURNDALE FL 33823

TITLE D
NAME LEVY, BYERS P
STREET ADDRESS 4429 ARLINGTON PARK DR
CITY-ST-ZIP LAKELAND FL 33801

TITLE D
NAME KNAPP, DONALD O
STREET ADDRESS 4500 HWY 92 E SUITE 1030 CLUB HOUSE
CITY-ST-ZIP LAKELAND FL 33801

TITLE D
NAME JOHNSTON, MARVIN
STREET ADDRESS 4500 HWY 92 E SUITE 1030 CLUB HOUSE
CITY-ST-ZIP LAKELAND FL 33801

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/99
Date

(941) 665-0185
Daytime Phone #

CR2E034 (11/98)