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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700085994 (6)

SUNBELT HOMES OF SOUTHWEST FLORIDA, INC.

FILED Apr 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2055 TRADE CENTER WAY 2055 TRADE CENTER WAY NAPLES FL 34109 NAPLES FL 34109 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/06/1997 2. Principal Place of Business Mailing Address Applied For 348/560 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 22 27 Fee Required City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 26 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WOOD, G. STUART 2055 TRADE CENTER WAY 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34109 83 84 City 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 little if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition Addition THLE 1.1 TITLE COTTER, JEFFREY J NAME 1.2 NAME 90 Minnekaha Circle Maitland FL 32751 1026 TURNER RD. STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL 32789 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE WOOD, G. STUART NAME 22 NAME STREET ADDRESS **205**5 TRADE CENTER WAY 23 STREET ADDRESS Z. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITL€ Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 reservor or trustee emowared 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 a machine the same legal effect as if made under oath; that I am an officer or director of the corporation or the reservor or trustee emowared 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 a machine the same legal effect as if made under oath; that I am an officer or director of the corporation or the reservor of the corporation of