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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9800070700 1. Corporation Name

MCNALLY SIGNATURE HOMES, INC.

Mailing Address

## **FILED** May 01, 1999 8:00 am Secretary of State

05-01-1999 90091 019 \*\*\*150.00

 121 <b>11</b> 211 <b>20</b> 11) <b>11</b> 121 1 <b>0</b> 112 1 <b>01</b> 21	<b>BP</b> () ( 1882)

Principal Place	e of Business	IVIa	alling Address							
8211 S.W. OLD	KANSAS AVENUE	821	1 S.W. OLD KANSAS	AVENUE						
STUART FL 349	997	STU	UART FL 34997				DO NOT WR	ITE IN THIS	SPACE	
						3. Data Is				
	1						corporated or Qualifed			i
					~~		3/1998			
2. Principal P	lace of Business	<u> </u>	Mailing Address			4. FELNU			<b>*</b>	Applied For
21 595	S.W. HARBOR	STREET 26	595 S.W. H	arbor	<u>Street</u>	Apolie	dfor			Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certifo	ate of Status Desired			Additional
22		27		, <u> </u>			,		Fee	Required
City & Stat	e		City & State			6. Electio	n Campaign Financing	_	\$5.0	May Be
23 ST U	LART	28	Stuart	.FL		Trust F	und Contribution		Adde	d to Fees
Zip	Country		Zip	Cou	ntry	8. This co	rporation owes the cur	rent year Inta	ingible	
24 3499	7 25 USA	29	34997	30	usa	Persor	al Property Tax.		Yes	<b>X</b> No
	9. Name and Address o	Current Regist	tered Agent			10. Name	and Address of New	Registered A	gent	
					81 Name	1				ļ
MCN	IALLY, DON				00 01	(D.O. F-	No to Net Assess			
8211	S.W. OLD KANSAS AVE	NUE			82 Street	S S W	Number is Not Accept	adle) オルドドコ	_	1
	ART FL 34997				83 3.7	2 31W1	HAKDOK -			
<b>V.</b> 0.					• •					
					84 City				85 Zij	Code
								<u> </u>		
11. Pursuant	to the provisions of Sections	607.0502 and 60	07.1508, Florida Stat	utes, the al	ove-name	corporation submi	ts this statement for the	purpose of o	changing i	ts registered
office or r	registered agent, or both, in the registered agent, or both, in the rm familiar with, and accept the	ne State of Florid ne obligations of	ia. Such change was Section 607 0505 F	autnorizeo Iorida Stati	by the con	poration's board or t	mectors. I nereby acce	bruie appoin	ilinent as	registered
agent la					nes.					
agent. I a	in lamiliai with, and accept to		Dection 307.0000, 1	ionaa otat	nes.					ł
agent. I a						required when reinstating)		DATE	<del></del>	<del></del>
agent. I a	Signature, typed or printed name of reg	istered agent and title it	f applicable. (NO				ONS/CHANGES TO OF		D DIREC	FORS IN 12
agent. I a SIGNATURE 12.	Signature, typed or printed name of reg		f applicable. (NO	TE: Registered	Agent signature	ADDITIO	ONS/CHANGES TO OF		D DIREC	
agent. I a SIGNATURE  12.	Signature, typed or printed name of reg OFFIC	istered agent and title it	if applicable. (NO	TE: Registered 13.	Agent signature	P/D/T MCNALLY	. DON	FICERS AN		
agent. I a SIGNATURE  12.  TITLE NAME	Signature, typed or printed name of reg OFFIC D MCNALLY, DON	istered agent and title it	if applicable. (NO	13. 1.1 TII	Agent signature LE ME	P/D/T MCNALLY	. DON	FICERS AN		
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	if applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST	Agent signature TLE ME REET ADDRESS	P/D/T MCNALLY 595 S.W.	, DON HARBOR STRE	FICERS AN		
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of reg OFFIC D MCNALLY, DON	istered agent and title it	of applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI	Agent signature TLE ME REET ADDRESS TY-ST-ZIP	P/D/T McNALLY 595 S.W. STUART	. DON	FICERS AN	<b>⊠</b> Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	if applicable. (NO	13. 1.1 TH 1.2 NA 1.3 ST 1.4 CF 2.1 TH	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	P/D/T McNALLY 595 S.W. STUART V/S/O	, DON HARBOR STRE FL 34997	FICERS AN		e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY	, DON HARBOR STRE FL 34997 NANCY	ET	<b>⊠</b> Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO CTORS DELETE	13. 1.1 III 1.2 NA 1.3 ST 1.4 CI 2.1 III 2.2 NA	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W.	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	<b>⊠</b> Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W.	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W.	, DON HARBOR STRE FL 34997 NANCY	ET	<b>⊠</b> Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CII 2.1 TII 2.2 NA 2.3 ST 2.4 CI	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  LE  LE  LE  LE  LE  LE  LE  LE  L	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W.	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2. 4 CI 3.1 TII 3.2 NA	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  ME  ME  ME  ME  ME  ME  ME	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Chang	e Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP STREET ADDRESS CITY- ST-ZIP	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	of applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Chang	Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4. CI 4.1 TII	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME AME AME AME	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI	Agent signature  LE  ME  REET ADDRESS IY-ST-ZIP  LE  REET ADDRESS IY-ST-ZIP	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE REET ADDRESS ITY-ST-ZIP LE REET ADDRESS	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY- ST-ZIP	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE REET ADDRESS ITY-ST-ZIP LE REET ADDRESS	P/D/T MCNALLY 595 S.W. STUART V/S/O MCNALLY 595 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE REET ADDRESS ITY-ST-ZIP LE REET ADDRESS	P/D/T McNALLY 595 S.W. STUART V/S/O MCNALLY STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.5 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE AME REET ADDRESS IY-ST-ZIP LE AME REET ADDRESS	P/D/T McNALLY 595 S.W. STUART V/S/O MCNALLY STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS DELETE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.5 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST	Agent signature  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  ITY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  REET ADDRESS  IY-ST-ZIP  REET ADDRESS  IY-ST-ZIP  REET ADDRESS  IY-ST-ZIP	P/D/T McNALLY 595 S.W. STUART V/S/O MCNALLY STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	☐ Chang	Addition  Addition  Addition  Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC  D MCNALLY, DON 8211 S.W. OLD KANSA	istered agent and title it	f applicable. (NO CTORS   DELETE   DELE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI	Agent signature  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME	P/D/T McNALLY 595 S.W. STUART V/S/O MCNALLY STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Change Change	Addition  Addition  Addition  Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of reg OFFIC D MCNALLY, DON 8211 S.W. OLD KANSA STUART FL 34997	istered agent and title it	f applicable. (NO CTORS   DELETE   DELE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.5 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI 6.1 TII 6.2 NA	Agent signature  LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME ME REET ADDRESS IY-ST-ZIP LE ME	P/D/T MCNALLY S95 S.W. STUART V/S/O MCNALLY S95 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Change Change	Addition  Addition  Addition  Addition
agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of reg OFFIC D MCNALLY, DON 8211 S.W. OLD KANSA STUART FL 34997	istered agent and title it	f applicable. (NO CTORS   DELETE   DELE	13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI 6.1 TII 6.2 NA 6.3 ST	Agent signature  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  TY-ST-ZIP  LE  ME	P/D/T MCNALLY S95 S.W. STUART V/S/O MCNALLY S95 S.W. STUART	, DON HARBOR STRE FL 34997 NANCY HARBOR STR	ET	Change Change	Addition  Addition  Addition  Addition

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 suppliemental 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:

RE DON BIJMENALLY, PRESIDENT 4/39/99