## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P98000082112

SUPERIOR MOBILE HOME SALES, INC.

Mailing Address

Principal Place of Business

## **FILED** Jul 19, 1999 8:00 am Secretary of State

07-19-1999 90007 017 \*\*\*150.00



OCALA FL 3440				OCALA FL 34480							
	-0		00.	10112 01100				DO NOT WRITE IN TH	IS SPACE	<u></u>	
								3. Date Incorporated or Qualified 09/18/1998			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		Applied Fo	or
21				26				59-3533877	Not Applicable		
Suite, Apt. #, etc.				Suite, Apt.#, etc				5. Certificate of Status Desired	\$8.	7.5. Addition	al
22				27				Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23			28								
Zip		Country	⊢	Zip Country				8. This corporation owes the current year Intangible Personal Property.  Yes No			
24		25 Sugar	29	ornd Agont	30	Т		Intangible Personal Property.  10. Name and Address of New Registered			
	9. Name	and Address of Curre	nt Registe	ered Agent		81	Name	10. Name and Address of New Nagisters	u Aguin		
KINE	DER. JACK	SR.					J	ACK D.KINCER			
5581 SOUTH PINE AVENUE				8:			Street Add	ddress (P.O. Box Number is Not Acceptable) 4 S.E.37th PLACE, OCALA, FL.34480			
OCA			83	1014	S.E.S/CII PLACE, UCALI	<u>1,21.</u>	34480				
						84	City	CATA F		Zip Code	1
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11. Pursuant office or r	to the provis	ions of sections 607.05 ent. or both, in the Sta	02 and 607 te of Florida	7.1508, Florida Statute a. Such change was a	es, the authori	above-na ized by th	amed corporat	oration submits this statement for the purpose of tion's board of directors. I hereby accept the app	changing pointment a	as registered	í
agent. I a	m familiar w	ith, and accept the obli	gations of,	section 607.0505, Flo	orida S	Statutes.	•				-
SIGNATURE_					TE: B-	-internal Assa	at singatura sa	quired when reinstating) DATE	:	<del></del>	-
12.	Signature, typed	or printed name of registered ag OFFICERS A		<del></del>		3.	if BiSuarone Lor	ADDITIONS/CHANGES TO OFFICERS		CTORS IN	12
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14. I hereby certify that the information supplied with this filling 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.

SIGNATURES

JACK KINDER, SR

07/17/30

352-622-2460



5581 S. Pine Avenue Ocale, Florida 34480

JULY 12,1999

TO WHOM IT MAY CONCERN,

PLEASE BE ADVISED THAT THIS IS THE FIRST NOTICE I HAVE RECEIVED FROM YOU.

I CALLED AND WAS TOLD TO FILL OUT THE DOCUMENT AND MAIL IMMEDIATELY ALONG WITH\$150.00.

PLEASE ADVISE IF THIS IS NOT ACCEPTABLE AS I DO NOT WANT THIS CORPORATION IN DEFAULT.

THANK YOU FOR YOUR TIME.

SINCERELY,

JACK KINDER, SR. PRESIDENT