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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$55379

(9)

SPACE (COAST MOBILE HOME BRO	OKERS, INC.						
Principal Place of Business 700 N. WICKHAM RD. SUITE 101 MELBOURNE FL 32835-8866		Mailing Address 700 N. WICKHAM RD. SUITE 101 MELBOURNE FL 32835-8865				Date Incorporated or Qualified 3a. Date of Last Report 3a. Da		
9 Principal P	lace of Business	2a. Mailing Address			····	05/24/1991 04/12/1996 4. FEI Number Applied For		r
21		26				59-3072560		Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				□ \$8.7	5 Additional
22		27				5. Certificate of Status Desired	1 1 2	Required
City & State		City & State				6. Election Campaign Financing		00 May Be
Zip Country		Zip Country				1 rust Fund Contribution Added to Fees		
Zip 24	25	Z ip 29	30	ınıry 1		<u> </u>	Yes No	er s. 199.032,
EDAN	Name and Address of CurrentNK LUCIANO	ur vaðisraran Aðaur		81	Name	10. Name and Address of New Reg	Jistered Agent	
	N WICKHAM RD							
	BOURNE FL 32935			82	Street Addre	ess (P.O. Box Number is Not Acceptable	le)	
******				83		· · · · · · · · · · · · · · · · · · ·		-
•				84	City	·	—. 85 Z	rp Code
				04	City		FL 🎳 🖰	.ip Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.050 egistered agent, or both, in the Stato m familiar with, and accopt the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was pations of, Section 607.0505, F	ites, the a authorize Iorida Sta	bove d by tutes	e-named corporation	oration submits this statement for the pi on's board of directors. I hereby accep	urpose of changin t the appointment	g its registered as registered
SIGNATURE								
Signature, typed or printed name of registered agent and talle if application (NOTE Ro 12. OFFICERS AND DIRECTORS			1E: Rogistere	o Agei	nt signature require	d when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECT	ORS IN 12
TITLE				1.1 TOLE		ALDINOTON TIME TO CITTO	Chan	
NAME	LUCIANO, FRANK		1.2 N					
STREET ADDRESS	700 N WICKHAM RD, S101		1. 3 S	1.3 STREET ADDRESS				
CITY-ST-ZIP	MEBOURNE FL 32935		1.4 C	TY-51	1 - ZIP			
TITLE		☐ DELETE					Chan	ge 🔲 Addition
NAME		2.2						
STREET ADDRESS	•				ADDRESS			
CITY-ST-ZIP TITLE		DELLITE	2.4 City-S1-Zif Delete 3.1 Tale		1 - Z(P		Chan	pe Addition
NAME			3.2 NAME					85 E 1.0000000
STREET ADDRESS			3.3 STREET ADDRESS		ADDRESS			
CHTY-ST-ZIP		. з		3.4. C(1Y - S1 - ZIP				
TITLE	☐ DELETE		4.1 1	4.1 TITLE			Chan	ge 🔲 Addition
NAME			4.2 6	IAME				
STREET ADDRESS			4.3 \$	BEE1.	ADDRESS			
CITY-ST-ZIP			14-81	1 - ZIP		Па	F 1 4 1 7 9 7	
TITLE		LJ DELETE	5.1 TITLE 5.2 NAME				Chan	ge [_] Addition
NAME STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP			5.3 \$1RE£ 5.4 C(1) Y -					
TITLE		☐ DELETE	6.1 Ti				Chan	ge Addition
NAME		•	6.2 N				-	
STREET ADDRESS			6.3 S	REET.	ADORESS			
CITY-ST-ZIP				TY - \$1				
informatio I am an ol	in indicated on this annual report or :	supplemental annual report is rithe receiver or trustee empor	true and a wered to a	accu	rate and that i	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal as required by Chapter 607, Florida St	effect as if made	under oath: that