	PROFIT RPORATION JAL REPORT 1996	Sandra Secreta	RTMENT OF STATE B Mortham ary of State CORPORATIONS		
	MENT # \$706	38 (9)			
LAKE	VOOD HOMES, INC.			E HERRICAN DE PREMI DE LA DIVERDI DIVERDI DIVERDI DI	OJE OFOI) BEDE DEGE BEDE DEDE DEGE IDAL
Principal Plac	e of Business	Mailing Address			
		11201 NW 26 DR CORAL SPRINGS FL 33	3065		
				3. Date Incorporated or Qualified 08/05/1991	3a. Date of Last Report 05/01/1995
2. Principal P	ace of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt.	#. etc	Suite, Apt #. etc		<b>65-0283352 5.</b> Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	2	City & State		Settingale of Status Desired     Bection Campaign Financing	L Fee Required
23 Zip		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	7 ip	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s=199 032, Yes  No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	ENTLE, DOMINICK 1201 N.W. 26 DR.			dress (P.O. Box Number is Not Acceptable	
	ORAL SPRINGS FL 33065			aress (F.O. box Number is Not Acceptable	(e)
			83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statute			
				poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registered the appointment as repistered
agent I a	agistered agent, or both, in the State in familiar with, and accept the obliq			poration submits this statement for the pu tion's board of directors. I nereby accept	rpose of changing its registered the appointment as registered
agent I a	og stereo agent, or boin, in the State m familiar with, and accept the oblig Signature, spector princed name of registered ag	gations of, Section 607,0505, Fig.	ultrionzed by the corporatorida Statutes  E. Registered Agent segments, require	ion's tipard of directors. I hereby accept	the appointment as registered
agent I a	Specifies agent, or from in the State for familiar with, and accept the oblig Specifies by Feder providing or registered at OFFICERS AT	gations of, Section 607,0505, Flo	ultrionized by the corporat orida Statutes	tion's tipard of directors. I hereby accept	the appointment as registered
agent I a SIGNATURE  12. TITLE NAME	Signature hyped or provided many of registered at OFFICERS AT PT GENTRILE, DOMINICK	gations of, Section 607,0505, Fig.  perform tile Lapplicable (N.S)  ND DIRECTORS	E. Register 1 Agent signature, resp.  13.  11 TIFLE  12 NAME	ion's tipard of directors. I hereby accept	the appointment as registered  SHILL  SHILL  ERS AND DIRECTORS IN 12
agent I a SIGNATURE  12. TITLE NAME STREET ADDRESS	Spectro agent, or troin, in the state of familiar with, and accept the oblig Spectros spectros of regarded a OFFICERS AT PT GENTILE, DOMINICK 11201 NW 266 DR	gations of, Section 607,0505, Fig.  perform tile Lapplicable (N.S)  ND DIRECTORS	E. Registers Agent signature, resp.  13. 11 TITLE 12 NAME 13 STREET ADDRESS	ion's tipard of directors. I hereby accept	the appointment as registered  SHILL  SHILL  ERS AND DIRECTORS IN 12
agent I a SIGNATURE  12. TITLE NAME	Signature hyped or provided many of registered at OFFICERS AT PT GENTRILE, DOMINICK	gations of, Section 607,0505, Fig.  perform tile Lapplicable (N.S)  ND DIRECTORS	E. Register 1 Agent signature, resp.  13.  11 TIFLE  12 NAME	ion's tipard of directors. I hereby accept	the appointment as registered  SHILL  SHILL  ERS AND DIRECTORS IN 12
agent Ta SIGNATURE  12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME	Signature by Edit or per red name of regions of a State of PT  GENTILE, DOMINICK  11201 NW 266 DR  CORAL SPRINGS FL  SEC  GENTILE, BENJMIAN	yations of, Section 607.0505, Fig.  ped and title if applicable (N°)  ND DIRECTORS  DELETE	IL Registers Agent signature response  13.  11 TITLE  12 NAME  13 STREET ADDRESS  14 CITY - ST-ZIP	ion's tipard of directors. I hereby accept	TAN ERS AND DIRECTORS IN 12  Change Addition
Agent Ta SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature by Ed or percel time of registered at OFFICERS AT PT GENTILE, DOMINICK 11201 NW 266 DR CORAL SPRINGS FL SEC GENTILE, BENJMIAN 112011 NW 26 DR	yations of, Section 607.0505, Fig.  ped and title if applicable (N°)  ND DIRECTORS  DELETE	IT FILE  1 STREET ADDRESS  1 CTYLE  1 STREET ADDRESS  1 CTYLE  2 NAME  2 STREET ADDRESS  2 STREET ADDRESS	ion's tipard of directors. I hereby accept	TAN ERS AND DIRECTORS IN 12  Change Addition
agent Ta SIGNATURE  12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME	Signature by Edit or per red name of regions of a State of PT  GENTILE, DOMINICK  11201 NW 266 DR  CORAL SPRINGS FL  SEC  GENTILE, BENJMIAN	yations of, Section 607.0505, Fig.  ped and title if applicable (N°)  ND DIRECTORS  DELETE	INTRODUCED Dy the Corporatorida Statutes  I. Registers Lagent signature, resp.  13.  11 TILLE  12 NAME  13 STREET ADDRESS  14 CITY - ST-ZIP  21 NAME  22 NAME	ion's tipard of directors. I hereby accept	TAN  ERS AND DIRECTORS IN 12  Change Addition
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