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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S85253

(0)

CORDELL MOBILE HOME SUPPLY, INC.

FILED Feb 19 1998 8:00am Secretary of State



MIN 111 5. "							
Principal Place of Business Mailing Address							
4415 SE 53RD CT 4415 SE 53RD CT							
OCALA FL 34480 OCALA FL 34480				†	DO NOT WRITE II	OT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified			
				İ	10/01/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 26					59-3085429		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						□ \$8.	75 Additional
27				[5. Certificate of Status Desired	L F	ee Required
City & State	City & State	State			6. Election Campaign Financing	\$5	.00 May Be
23	28				Trust Fund Contribution		ded to Fees
Zip Country	Zip	Country			8. This corporation owes or has paid	the current ye	
24 25		90			Personal Property Tax due June 30. Yes No		
9. Name and Address of Current	Registered Agent			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Regi	stered Agent	
KRUEGER, SCOTT DAVID		81	יןי	Name			
234 SOUTH MAIN ST. GAINESVILLE FL 32601			2 s	Street Addres	s (P.O. Box Number is Not Acceptable)	
			\perp		· · · · · · · · · · · · · · · · · · ·		<u>.</u>
		83	3				
		84	i c	City		85	Zip Code
				•			
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of 	and 607.1508, Florida Sta tutes of Florida, Such change was au	s, the abov	ve-na	amed corporation	ation submits this statement for the pur	pose of chang	ing its registered
agent. I am lamiliar with, and accept the obligat	ions of, Section 607.0505, Flori	da Statute	98.	io oorpoitation	to board of directors. I hereby decopt	ие аррениие	in as registeres
SIGNATURE							
Signalure, typed or printed name of registered agent			ent si	signature required v		DATE	
12. OFFICERS AND	DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFFICE		
TITLE D	_	71. 71.722				☐ Cha	ange L Addition
NAME CORDELL, CECIL	SE 26 21	1.2 NAME					Ī
REET ADDRESS 2781 S.E. 48TH ST. 3401 SE 3644			1.3 STREET ADDRESS				
CITY-ST-ZIP OCALA FL 34471	DELETE	1.4 C(TY-	ST-ZI	IP		I Ch	ange Addition
, .n.=	- Deteric	2.1 TITLE					ange
NAME CORDELL, MARY STREET ADDRESS 2781-S.E. 48TH ST	SE DC 46-81	2.2 NAME					
STREET ADDRESS 2781 S.E. 481H UT	J (_ O×6 ~491	2.3 STREE		ì		m²	
CITY-ST-ZIP OCALA FL 34471	DELETE	2. 4 CITY-	-ST-Z	ŽΙΡ			TARRES
TITLE	L. DELLETE	3.1 TITLE		- 1		☐ Cha	ange L Addition
NAME		3.2 NAME					}
STREET ADDRESS		3.3 STREE					İ
CITY-ST-ZIP	T DELETE	3.4. CITY-	ST-Z	/IP			nas Addition
TITLE	☐ DELETE	4.1 TITLE				☐ Cha	ange L Addition
NAME		4. 2 NAME					Ì
STREET ADDRESS		4.3 STREE					İ
CITY-ST-ZIP	D DELETE	4.4 CITY-	ST - Z)(JP .			
TITLE	☐ DELETE	5.1 TITLE				Cha	ange Addition
NAME		5.2 NAME					Į
STREET ADDRESS		5.3 STREE	T ADD	DRESS			
CITY-ST-ZIP		5.4 CITY -	ST-ZII	IP .			
TITLE	☐ DELETE	6.1 TITLE				L_ Cha	inge Addition
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREE	T ADO	Dress			
CITY-\$T-ZIP		6.4 CITY-5					
14. I hereby certify that the information supplied with	this filing does not qualify for	the exemp	otion	stated in Se	ction 119.07(3)(i), Florida Statutes. I fui	ther certify the	t 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 or an attachment with an address.