

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

FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V25204 (1)
1. Corporation Name
ARBOR OAKS DEVELOPMENT CORP.

Principal Place of Business 240 N WASHINGTON BLVD 319 SARASOTA FL 34236 US	Mailing Address 240 N WASHINGTON BLVD 319 SARASOTA FL 34236 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 130 WILLOW BROOK DR Suite, Apt. #, etc. 22 City & State 23 ROSWELL GEORGIA Zip 24 30076 Country 25 U.S.		2a. Mailing Address 26 130 WILLOW BROOK DR Suite, Apt. #, etc. 27 City & State 28 ROSWELL GEORGIA Zip 29 30076 Country 30 US		3. Date Incorporated or Qualified 03/31/1992	4. FEI Number 65-0336944 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent GUSKI, STANLEY E., JR. 240 N WASHINGTON BLVD 319 SARASOTA FL 34236				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D GUSKI, STANLEY E SR. 240 N. WASHINGTON BLVD. SUITE 319 SARASOTA FL	1.1 TITLE	D GUSKI STANLEY E SR 130 WILLOW BROOK DR ROSWELL GA 30076
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	PT GUSKI, STANLEY E JR 240 N WASHINGTON BLVD 319 SARASOTA FL	2.1 TITLE	PT GUSKI STANLEY E JR 130 WILLOW BROOK DR ROSWELL GA 30076
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	S GUSKI, BONNIE J 240 N WASHINGTON BLVD 319 SARASOTA FL	3.1 TITLE	S GUSKI, BONNIE J 130 WILLOW BROOK DR ROSWELL GA 30076
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 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.

SIGNATURE:

Stanley E. Guski Jr

APRIL 12 1998 770-643-3977

CR2E034 (10/97)