


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

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Jun 27 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V29958 (8)  
1. Corporation Name  
IES MOBILE PARK AND SALES, INC.



Principal Place of Business 86 PLYMOUTH K W PALM BCH FL 33417-1652 US	Mailing Address 86 PLYMOUTH K W PALM BCH FL 33417-1652 US
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3. Date Incorporated or Qualified 04/21/1992	3a. Date of Last Report 04/11/1996
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2. Principal Place of Business 21 206 Greenbrier A Suite, Apt. #, etc. 22 City & State 23 W Palm Bch FL Zip 24 33417 Country 25 USA	2a. Mailing Address 26 206 Greenbrier A Suite, Apt. #, etc. 27 City & State 28 W Palm Bch FL Zip 29 33417 Country 30 USA
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4. FEI Number 65-0325634	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent SCHECHTER, IRVING E. 86 PLYMOUTH K W PALM BCH FL 33417	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 206 Greenbrier A 83 84 City W Palm Beach FL 85 Zip Code 33417
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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 607.1505, Florida Statutes.

SIGNATURE Irving E. Schechter 6/23/97  
(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 NAME STREET ADDRESS CITY-ST-ZIP PDTS SCHECHTER, IRVING E. 86 PLYMOUTH K. W PALM BCH FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 206 Greenbrier A W Palm Beach FL 33417
TITLE NAME STREET ADDRESS CITY-ST-ZIP V SCHECHTER, HERBERT 8821 W. 29TH ST. ST. LONIS PRK. MN 55426	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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 Irving E. Schechter 6/23/97  
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

CR2E034 (9/96)