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SIGNATURE:

14. Thereby certify that the information supplied with the indicated on this annual report of applicable and officer of director of the consolation of the receiver Block 12 or Block 13 if changed, or on an attack of the consolation of the receiver Block 12 or Block 13 if changed, or on an attack of the consolation o

Mar 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** V48568 XL HOMES INC. Principal Place of Business Mailing Address 151 WYMORE RD 151 WYMORE RD SUITE 688 SUITE 688 ALTAMONTE SPRINGS FL 32714 DO NOT WRITE IN THIS SPACE ALTAMONTE SPRINGS FL 32714 3. Date Incorporated or Qualified 07/08/1992 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3131000 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State Cilv & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WARLICK, THOMAS H ESQ. Fassett, Ladd Esq. Street Address (P.O. Box Number is Not Acceptable) WARLICK, FASSETT & ANTHONY, P.A. 82 14 E. WASHINGTON ST., SUITE 500 Fassett, Anthony & Taylor, P.A ORLANDO FL 32801 14 E. Washington St., Suite 500 Zip Code 32801 Orlando 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 about to both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar unit, and accept the obligations of, Section 607.0505, Florida Statutes. 23 148 SIGNATURE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DILETE TITLE 1.1 TITLE Change ___ Addition CHEN, ERIC NAME 1931 YEAGER AVE. STREET ADDRESS 1.3 STREET ADDRESS LAVERNE CA CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DERMON, DUMONT A NAME 22 NAME 953 RED FOX RD. STREET ADDRESS 2.3 STREET ADDRESS ALTAMONTE SPGS. FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE RAHMAN, JAMES W. NAME 3.2 NAME 16501 BAY CLUB DR STREET ADDRESS 3.3 STREFT ADDRESS CLERMONT FL CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE NAME CHEN, LINA 4. 2 NAME 1931 YEAGER AVE. STREET ADDRESS 4.3 STREET ADDRESS LAVERNE CA CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

Islang does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information function to the same legal effect as if made under oath; that I am an or this loc empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ent with an address

FILED