FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V60240** **(1)**

1. Corporation Name

MONOGRAM CUSTOM HOMES, INC.

Principal Place of Business

2120 CORPORATE SQUARE BLVD.
SUITE 3
JACKSONVILLE FL 32216

Mailing Address

2120 CORPORATE SQUARE BLVD.
SUITE 3
JACKSONVILLE FL 32216

3. Date Incorporated or Qualified: **08/26/1992**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **59-3163512** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. [ ] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**

SEMANIK, JOHN A.
2120 CORPORATE SQUARE BLVD.
SUITE 3
JACKSONVILLE FL 32216

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

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

12. OFFICERS AND DIRECTORS

Field	Entry	
TITLE	DP	[ ] DELETE
NAME	SEMANIK, JOHN A.	
STREET ADDRESS	2120 CORP. SQ. BLVD., #3	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VP	[ ] DELETE
NAME	SEMANIK, LINDA	
STREET ADDRESS	2120 CORPORATE SQ. BLVD. #3	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VP	[ ] DELETE
NAME	SEMANIK, ARNOLD J	
STREET ADDRESS	2120 CORPORATE SQ BLVD	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	V	[ ] DELETE
NAME	COGBURN, FAYE A	
STREET ADDRESS	2120 CORPORATE SQ. BLVD.	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Field	Entry	
1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-96 Date

904 724-7500 Daytime Phone #