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 # (4)V68980 HOME OWNERS MARKETPLACE OF ORLANDO, INC.

Principal Place of Business

Mailing Address

1710 W PERMENT BLUM

FILED Apr 16 1998 8:00am Secretary of State



TAMPA FL 33		TAMPA FL 33606			
				DO NOT WRITE IN THIS SE	PACE
				3. Date Incorporated or Qualified	
				10/01/1992	
2. Principal Pt	ace of Business	2a. Mailing Address	. A.	4. FEI Number	Applied For
21: 27.3 .	Ford Ro		neria MV	S 59-3156257	Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.	00	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	nto.FL	City & State	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 328	OG 25 ORANA	Zip 20 33609	a Country	8. This corporation owes or has paid the curre	
<u> </u>	9. Name and Address of Curr	ent Registered Agent	13011111120040	10. Name and Address of New Registered A	_
BENNATI, ALVIN A SR. BENNATI, SR.					
	9 W KENNEDY BLVD APA FL 33606		82 Street	Address (P.O. Box Number is Not Acceptable)	
וחת	NFA FL 33000		63	ute 100	
			84 City	Tampa 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 607.0506, Florida Statutes.					
SIGNATURE					
12.		igent and title if applicable (NOTI ND DIRECTORS			NOTOTOTO 11. 40
TITLE T	DVP	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND (Change Addition
		_ Ditti		ALVIN A. BENNATI, SR.	Change Abdition
NAME	BENNATI, ALVIN A. S.R.		1.2 NAME	1115. ARmema Ave Su	***
STREET ADDRESS	1719 W KENNEDY BLVD		1.3 STREET ADDRESS	III 3. HILMENIA MAS 20	16 100
CITY-ST-ZIP	TAMPA FL	T DELEVE	1.4 CITY - ST - ZIP	Tampa, FL 33609	
TITLE	DP	DELETE	2.1 TITLE	L	Change
NAME	BENNATI, MARJORIE		2.2 NAME	111 S. ARmeria Ave Sut	- 100
STREET ADDRESS	1719 W KENNEDY BLVD		2.3 STREET ADDRESS		6100
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP	Tampa, FL 33609	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	L	☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHTY - ST - ZIP		
TITLE		☐ DELETE	5.1 TATLE		Change Addition
NAME]			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		-
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	ertify that the information supplied	with this filing does not qualify for		nd in Section 119.07(3)(i), Florida Statutes. I further certi	fy 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.

4/8/98

813-893-1999