2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004
Secretary of State

DOCUMENT# H34531

Entity Name: LIFE STYLE HOMES OF TAMPA BAY, INC.

Current Principal Place of Business:

167 26TH AVENUE NORTH
SAINT PETERSBURG, FL 33704 US

New Principal Place of Business:

Current Mailing Address:

167 26TH AVENUE NORTH
SAINT PETERSBURG, FL 33704 US

New Mailing Address:

FEI Number: 59-2475020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITTMORE, KENT G
ONE BEACH DRIVE SE, SUITE 205
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

WHITTMORE, KENT G
ONE BEACH DRIVE SE
SUITE 205
ST PETERSBURG, FL 33701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 01/28/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: SCHIERECK, LESTER C.,
Address: 167-26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: S ( ) Delete
Name: SCHIERECK, SUSAN,
Address: 167-26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: SCHIERECK, LESTER C
Address: 167-26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: S (X) Change ( ) Addition
Name: SCHIERECK, SUSAN
Address: 167-26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESTER C. SCHIERECK P 01/28/2004
Electronic Signature of Signing Officer or Director — Date