

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 13, 2009
Secretary of State**

DOCUMENT# L37983

Entity Name: SUNTECH HOMES, INC.

Current Principal Place of Business:

3600 GALILEO DRIVE
SUITE 104
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

3600 GALILEO DRIVE
SUITE 104
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 59-2988942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORSI, JULIE ANNE
3600 GALILEO DRIVE
SUITE 104
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VSTD () Delete
Name: ORSI, DEBORAH ELLEN
Address: 3600 GALILEO DRIVE, SUITE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: P () Delete
Name: ORSI, JULIE ANNE
Address: 3600 GALILEO DRIVE, SUITE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: V () Delete
Name: BUCK, PATRICIA O
Address: 3600 GALILEO DRIVE, SUITE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: ORSI, MICHAEL
Address: 3600 GALILEO DRIVE, SUITE 104
City-St-Zip: NEW PORT RICHEY, FL 34655

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JULIE ANNE ORSI

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date