

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 18, 2006  
Secretary of State**

DOCUMENT# P02000026766

Entity Name: HARTLAND HOMES, INC.

**Current Principal Place of Business:**

13779 LINDEN DR  
SPRING HILL, FL 346095074

**New Principal Place of Business:**

13804 LINDEN DRIVE  
SPRING HILL, FL 346095074

**Current Mailing Address:**

13779 LINDEN DR  
SPRING HILL, FL 346095074

**New Mailing Address:**

P. O. BOX 3082  
SPRING HILL, FL 34611

FEI Number: 01-0667782      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOBENHAUSEN, GALE M ESQ  
30 BISHOP CREEK DRIVE  
SAFETY HARBOR, FL 34695      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:            D            ( ) Delete  
Name:            INGOGLIA, BLAISE  
Address:        PO BOX 3082  
City-St-Zip:    SPRING HILL, FL 346113082

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            DPS            (X) Change ( ) Addition  
Name:            INGOGLIA, BLAISE  
Address:        PO BOX 3082  
City-St-Zip:    SPRING HILL, FL 34611

Title:            T            ( ) Change (X) Addition  
Name:            HARPER, TRACY  
Address:        PO BOX 3082  
City-St-Zip:    SPRING HILL, FL 34611

I hereby certify that the information supplied with this filing does not qualify for the 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: BLAISE INGOGLIA

P

10/18/2006

Electronic Signature of Signing Officer or Director

Date