## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P0400003939

Entity Name: LOGAN CLASSIC HOMES, INC.

FILED Jun 09, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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210 SE 37TH TERRACE 1222 SE 47TH STREET # 206 CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

210 SE 37TH TERRACE 1222 SE 47TH STREET # 206 CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

FEI Number: 20-0568720 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

KOHL, ETTA R 3910 COUNTRY CLUB BLVD CAPE CORAL, FL 33904 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition LOCKWOOD, DAVID A LOCKWOOD, DAVID A Name: Name: 210 SE 37TH TERRACE 1222 SE 47TH STREET # 206 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

 Title:
 VP/D
 ( ) Delete
 Title:
 VP
 (X) Change ( ) Addition

 Name:
 MINGER, STEVEN J
 Name:
 LOCKWOOD, DAVID A

 Address:
 7317 WETHERINGTON
 Address:
 1222 SE 47TH STREET # 206

Address: 7317 WETHERINGTON Address: 1222 SE 47TH STREET # 206
City-St-Zip: WEST CHESTER, OH 45069 City-St-Zip: WEST CHESTER, OH 45069

Title: S () Delete Title: S (X) Change () Addition Name: MINGER, STEVEN J Name: LOCKWOOD, DAVID A

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Title: T ( ) Delete Title: T (X) Change ( ) Addition
Name: LOCKWOOD, DAVID A Name: LOCKWOOD, DAVID A

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 LOCKWOOD, DAVID A

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 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904

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: DAVID LOCKWOOD PRES 06/09/2005