

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jun 16, 2006  
Secretary of State**

DOCUMENT# P04000005504

Entity Name: RIGHT CHOICE HOMES INC

**Current Principal Place of Business:**

11143 WILLMINGTON BLVD.  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

11143 WILLMINGTON BLVD.  
ENGLEWOOD, FL 34224

**New Mailing Address:**

FEI Number: 20-0560327      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARTINS, DAVID D  
1181 MCCORY ST.  
NORTH PORT, FL 34286      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: P      ( ) Delete  
Name: MARTINS, DAVID D  
Address: 1181 MCCORY ST.  
City-St-Zip: NORTH PORT, FL 34286

Title: SEC      ( ) Delete  
Name: MARTINS, DANIEL D  
Address: 1181 MCCORY ST.  
City-St-Zip: NORTH PORT, FL 34286

Title: VP      ( ) Delete  
Name: MYRTLE, SHAUN E  
Address: 4703 KEY DEER TERRACE  
City-St-Zip: PARRISH, FL 34219

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

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

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

Title: VP      (X) Change ( ) Addition  
Name: MARTINS, DANIEL D  
Address: 1181 MCCORY ST.  
City-St-Zip: NORTH PORT, FL 34219

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: DAVID D. MARTINS

P

06/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date