

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117269

Entity Name: SPARKS HOME TEAM REALTY INC

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

5609 US 19
SUITE L
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

9300 REGENCY PARK BOULEVARD
PORT RICHEY, FL 346685023 US

New Mailing Address:

5609 US 19
SUITE L
NEW PORT RICHEY, FL 34652 US

FEI Number: 20-3377400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENNESSY FINANCIAL GROUP INC
9300 REGENCY PARK BOULEVARD
PORT RICHEY, FL 346685023 US

Name and Address of New Registered Agent:

SIMMONS, SHELLEY
5609 US 19
SUITE L
NEW PORT RICHEY, FL 34652 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: SHELLEY SIMMONS

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIMMONS, SHELLEY
Address: 4635 ABDELLA LANE
City-St-Zip: HOLIDAY, FL 34690 US

Title: VP () Delete
Name: SPARKS, JERRY
Address: 6814 LASSON AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34655 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMMONS, SHELLEY
Address: 5609 US 19 STE L
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VP (X) Change () Addition
Name: SPARKS, JERRY
Address: 5609 US HWY 19 STE L
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: SHELLEY SIMMONS

PRES

04/19/2006

Electronic Signature of Signing Officer or Director

Date