

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 22, 2009
Secretary of State**

DOCUMENT# P07000027020

Entity Name: ENEXIS HOMES, INC.

Current Principal Place of Business:

543 COMMERCIAL BOULEVARD
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

543 COMMERCIAL BOULEVARD
NAPLES, FL 34104

New Mailing Address:

FEI Number: 20-8515225 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, JORGE F
543 COMMERCIAL BOULEVARD
NAPLES, FL 34104 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: PD () Delete
Name: MEDINA, ENEXIS
Address: 543 COMMERCIAL BOULEVARD
City-St-Zip: NAPLES, FL 34104

Title: VD () Delete
Name: MEDINA, JORGE F
Address: 543 COMMERCIAL BOULEVARD
City-St-Zip: NAPLES, FL 34104

Title: STD () Delete
Name: MEDINA, LIANA
Address: 543 COMMERCIAL BOULEVARD
City-St-Zip: NAPLES, FL 34104

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: MBR () Change (X) Addition
Name: DE LEON, OSCAR R
Address: 855 CARDINAL ST
City-St-Zip: NAPLES, FL 34104 US

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: OSCAR RICARDO DE LEON

MBR

10/22/2009

Electronic Signature of Signing Officer or Director

Date