2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 8:00 am Secretary of State

Mailing Address Mailing Ad	DOCUMENT # P04000142597 1. Entity Name ANCHOR MANUFACTURED HOME SERVICES, INC.						05-02-2005	90494 024 ***15	50.00	
335 GAM POINT CT VENUE, FL 34/292 Obete	Principal Place of Business Mailing Address									
Suite, Apt. 4, etc. City & State City & State City & State Lip Country Zip Country Zip Country S. Certificate of Status Desired Status Registered Agent 7. Name and Address of New Registered Agent REEGLER, SARI LYNN REEGLER, SARI LYNN REEGLER, AT TORNESE, P.A. 1521 S TAMMAINI TRAIL VENICE, FL 34285 City FL 2/p Coole 6. The aboven named entry submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. Lam lamiliar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE SIGNATURE After Many 1, 2005 Fee will be \$550.00 PLE Inciden Contrabulon. SIGNATURE Defeate MARTINEAU, ALBERT SIRRELANDESS SIRRELANDESS SIRRELANDESS CITY-ST-2P ITILE MARTINEAU, CYNTHIA MARTINEAU, CYNTHIA MARTINEAU, CYNTHIA MARTINEAU, CYNTHIA MARK MARTINEAU, CYNTHIA MARK MARTINEAU, CYNTHIA MARK MAR	1336 OAK POINT CT 1336 OAK POI									
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S. Certificate of States Service Fee Required F	City & Stat	a	City & State		2018	17139		•		
REEGLER, SARI LYNN REEGLER & TORNESE, P.A. 1521 STANIAM TRAIL VENICE, FL 34285 City FL Zip Code	Zip	Country	Zip	Zip Count		5. Certificate	of Status Desired			
REEGLER & TORNESE, P.A. 1521 S TAMIAMI TRAIL VENICE, FL 34285 City FL Zip Code 8. 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. I am familier with, and accept the obligations of registered agent, or both, in the State of Florida. I am familier with, and accept the obligations of registered agent. SIGNATURE FILE NOWITI FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Determine May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE MART INSEAU, ALBERT STREET AGRESS CITY-ST-2P TITLE MART INSEAU, CYNTHIA SIREET AGRESS CITY-ST-2P TITLE MARE SIREET A		6. Name and Address of Current F	Registered Agent			7. Name and	Address of New R	egistered Agent		
Street Address (P.O. Box Number is Not Acceptable)	DEEGI ED	SARLI VNN			Name					
VENICE, FL 34285 City FL Zip Code 8. 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, highed or printed name of registered agent exists of Experiments. (IACTE: Registered Agent dyname required when rectasting) FILE NOWITH FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIME DAMARTINEAU, ALBERT 1336 OAK POINT CT VENICE, FL 34292 1336 OAK POINT CT WENCE, FL 34292 Delete MARTINEAU, CYNTHIA 1336 OAK POINT CT WENCE, FL 34292 Delete TIME MARTINEAU, CYNTHIA 1336 OAK POINT CT VENICE, FL 34292 Delete TIME MAKE 1336 OAK POINT CT WENCE, FL 34292 Delete TIME MAKE 1336 OAK POINT CT WENCE, FL 34292 Delete TIME MAKE 1336 OAK POINT CT WENCE, FL 34292 Delete TIME MAKE 1336 OAK POINT CT WENCE, FL 34292 Delete TIME MAKE 5IRET ADDRESS CITY-ST-2P Delete TIME MAKE 5IRET ADDRESS CITY-ST-2P Delete TIME MAKE 5IRET ADDRESS CITY-ST-2P TIME MAKE 5IRET ADDRESS CITY-ST-2P TIME MAKE 5IRET ADDRESS CITY-ST-2P Delete TIME MAKE 5IRET ADDRESS CITY-ST-2P TIME MAKE 5IRET ADDRESS CITY-ST-2P Delete TIME MAKE 5IRET ADDRESS CITY-ST-2P Change Addition MAKE 5IRET ADDRESS CITY-ST-2P Change Change Addition MAKE 5IRET ADDRESS CITY-ST-2P CIT						Street Address (P.O. Box Number is Not Acceptable)				
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B. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Spanure, hybrid or givined name of registered agent and site if applicable. MOTE Registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Spanure, hybrid or givined name of registered agent and site if applicable. MOTE Registered Agent signature required when rentating) DATE FILE NOW!!! FEE IS \$150.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITTLE D MARTINEAU, ALBERT SIREET ADDRESS CITY-ST-2P MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MILE D Delete MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MARTINEAU, CYNTHIA SIREET ADDRESS CITY-ST-2P TITLE D Delete MILE MARE SIREET ADDRESS CITY-ST-2P TITLE D Delete SIREET ADDRESS CITY-ST-2P TITLE MANE SIREET ADDRESS CITY-ST-2P TITLE D Delete SIREET ADDRESS CITY-ST-2P TITLE D Delete SIREET ADDRESS CITY-ST-2P TITLE MANE SIREET ADDRESS CITY-ST-2P TITLE D Delete SIREET ADDRESS CITY-ST-2P TITLE MANE SIREET ADDRESS CITY-ST-2P TITLE MANE SIREET ADDRESS CITY-ST-2P TITLE MANE SIREET ADDRESS CITY-ST-2P TITLE MARE SIREET ADDRESS CITY-ST-2P	VENICE, FL 34285				O'h				4 -	
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

941-483-3110