2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2006
Secretary of State

DOCUMENT# G28548

Entity Name: RESIDENTS' HOME SERVICES, INC.

Current Principal Place of Business:

13 PAR CLUB CIR.
VILLAGE OF GOLF, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

13 PAR CLUB CIR.
VILLAGE OF GOLF, FL 33436 US

New Mailing Address:

FEI Number: 59-2278485 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALLERANO, JAMES A JR.
1201 GEORGE BUSH BLVD
DELRAY BEACH, FL 334837203 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: DICKES, BYRAM
Address: 26 COUNTRY RD
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: S ( ) Delete
Name: LYNCH, TOM
Address: 28 COUNTRY RD
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: T ( ) Delete
Name: GARRARD, JAMES
Address: 5 PARK PLACE
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: BMD ( ) Delete
Name: MUSE, KAREN
Address: 31 COUNTRY ROAD SOUTH
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: MBD ( ) Delete
Name: SPENGLER, WILLIAM F
Address: 5 PAR CLUB CIRCLE
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: PD ( ) Delete
Name: CONNER, DAVID B
Address: 4826 NW 102ND AVE
City-St-Zip: CORAL SPRINGS, FL 33076

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

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

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

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: DICKES, BYRAM C 04/22/2006

Electronic Signature of Signing Officer or Director Date