


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 418802
 1. Entity Name
 HOMES OF MERIT, INC.



Principal Place of Business
 PO BOX 1606
 BUILDING 121 BARTOW AFB
 BARTOW, FL 33830 US

Mailing Address
 2701 CAMBRIDGE CT, 300
 AUBURN HILLS, MI 48326 US



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-1438488 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION, FL 33324

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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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAMS, B J 1738 B HILLDALE RD # 203 DURHAM, NC 27705
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRUGGE, RICK 2701 CAMBRIDGE CT #300 AUBURN HILLS, MI 48326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NICKLAS, DERELL 2701 CAMBRIDGE CT #300 AUBURN HILLS, MI 48326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS COLLINS, JOHN J JR 2701 CAMBRIDGE CT #300 AUBURN HILLS, MI 48326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS CECIL, JOE 2701 CAMBRIDGE CT #300 AUBURN HILLS, MI 48326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS SETTLE, NEIL 2701 CAMBRIDGE CT #300 AUBURN HILLS, MI 48326

U00000529971
 05/05/06-80098-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 another like empowered.

SIGNATURE: Jimmy Paul Jimmy Paul 1/9/06 248-340-7253
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #