

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 532892

FILED  
May 01, 2005  
Secretary of State

Entity Name: PENNYWORTH HOMES, INC.

## Current Principal Place of Business:

9335 W. TENNESSEE STREET  
TALLAHASSEE, FL 32304 US

## New Principal Place of Business:

## Current Mailing Address:

679 BLACKSHEAR ROAD  
THOMASVILLE, GA 31792 US

## New Mailing Address:

FEI Number: 59-1755035

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WADSWORTH, JAMES B  
1040 E PARK AVE  
TALL, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALTER, EBE  
Address: 659C BLACKSHEAR RD  
City-St-Zip: THOMASVILLE, FL 31792 US

Title: STV ( ) Delete  
Name: LADSON, WILLIAM F III  
Address: 904 GORDON AVE  
City-St-Zip: THOMASVILLE, GA 31792 US

Title: VP ( ) Delete  
Name: POMEROY, JOHN P JR  
Address: RTE 2, BOX 105F  
City-St-Zip: MONTICELLO, FL 32344 US

## 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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM F LADSON

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05/01/2005

Electronic Signature of Signing Officer or Director

Date