## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 630674** 

City-St-Zip:

( ) Delete

Title:

Name:

Address:

City-St-Zip:

FILED Feb 13, 2006 Secretary of State

Entity Nar	ne: VAL CO	URSEY HOMES, INC.			•		
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:			
225 DUNC HWY 19							
TAVARES,	, FL 32778	US					
Current M	ailing Addre	ess:	New Maili	ng Addres:	s:		
P.O. BOX A		US					
FEI Number:	59-1920579	FEI Number Applied For()	El Number Not Appl	licable ( )	Certificate of Status Desired ( )		
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
30849 FAIF	C. COURSEY RVIEW AVE. FL 32778	US					
	named entity of Florida.	v submits this statement for the purp	oose of changing i	ts registere	d office or registered agent, or both,		
SIGNATUR	RE:						
	Electro	onic Signature of Registered Agent			Date		
Election Can	npaign Financii	ng Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PT ( COURSEY, JO 30849 FAIRVI TAVARES, FL	IEW AVE.	Title: Name: Address: City-St-Zip:	P COURSEY, 30849 FAIR TAVARES, F	VIEW AVE.		
Title: Name: Address: City-St-Zip: Title:	COURSEY, AI 30849 FAIRVI TAVARES, FL	IEW AVENUE	Title: Name: Address: City-St-Zip: Title:	V COURSEY, 30849 FAIR TAVARES, F	VIEW AVENUE		
Name: Address:	(	, Delete	Name: Address:	COURSEY, 1207 TEXAS	SARAH M		

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

TAVARES, FL 32778 US

COURSEY, REBECCA L

TAVARES, FL 32778 US

30849 FAIRVIEW AVE.

( ) Change (X) Addition

SIGNATURE: AMANDA COURSEY V 02/13/2006