2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# 769898

Entity Name: CARPENTER'S HOME ESTATES, INC.

Current Principal Place of Business:

1001 CARPENTER'S WAY
LAKELAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

1001 CARPENTER'S WAY
LAKELAND, FL 33809 US

New Mailing Address:

FEI Number: 59-2347336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	STRADER, KARL D.,	
Address:	777 CARPENTER'S WAY	
City-St-Zip:	LAKELAND, FL	
Title:	D	( ) Delete
Name:	INGLIS, DAVID	
Address:	707 CARPENTERS WAY #37	
City-St-Zip:	LAKELAND, FL	
Title:	D	( ) Delete
Name:	SHORT, RILEY DR.	
Address:	73 LAKE MORTON DR	
City-St-Zip:	LAKELAND, FL	
Title:	D	( ) Delete
Name:	EDWARDS, DWIGHT	
Address:	1801 HAVENDALE BLVD	
City-St-Zip:	WINTER HAVEN, FL 33881	
Title:	SD	( ) Delete
Name:	JOHNSON, MALLORY	
Address:	707 CARPENTER'S WAY #37	
City-St-Zip:	LAKELAND, FL 33809	
Title:	DT	( ) Delete
Name:	GILLMAN, LEO	
Address:	1707 W. REYNOLDS ST	
City-St-Zip:	PLANT CITY, FL 33567	

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MALLORY JOHNSON SECR 04/29/2005
Electronic Signature of Signing Officer or Director — Date