

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 10, 2004
Secretary of State**

DOCUMENT# F00000000485

Entity Name: HOME BUILDERS INSTITUTE INCORPORATED

Current Principal Place of Business:

1201 15TH STREET N.W.
SIXTH FLOOR
WASHINGTON, DC 20005

New Principal Place of Business:

Current Mailing Address:

1201 15TH STREET N.W.
SIXTH FLOOR
WASHINGTON, DC 20005

New Mailing Address:

FEI Number: 52-1266885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, PAUL M CAE
201 EAST PARK AVENUE
TALLAHASSEE, 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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MULLEN, THOMAS
Address: 6251 BEHNER WAY
City-St-Zip: INDIANAPOLIS, IN 46250

Title: VC () Delete
Name: SATTLER, JAMES A
Address: 3801 RIVER RIDGE DR. NE
City-St-Zip: CEDAR RAPIDS, IA 524027531

Title: P () Delete
Name: HUMPHREYS, FREDERICK N
Address: 1201 15TH STREET SIXTH FLOOR N.W.
City-St-Zip: WASHINGTON, DC 20005

Title: T () Delete
Name: NICOLAOU, MARIA C
Address: 1201 15TH STREET SIXTH FLOOR N.W.
City-St-Zip: WASHINGTON, DC 20005

Title: S () Delete
Name: BRAY, LAURA
Address: 1201 15TH STREET SIXTH FLOOR N.W.
City-St-Zip: WASHINGTON, DC 20005

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: SATTLER, JAMES
Address: 3801 RIVER RIDGE DR. NE
City-St-Zip: CEDAR RAPIDS, IA 524027531

Title: VC (X) Change () Addition
Name: SMITH, PATSY R
Address: 1903 CENTRAL DRIVE, SUITE 403
City-St-Zip: BEDFORD, TX 76021

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: MARIA NICOLAOU

T

08/10/2004

Electronic Signature of Signing Officer or Director

Date