

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005045

FILED
Apr 29, 2006
Secretary of State

Entity Name: PRESIDENT HOMES, INC.

Current Principal Place of Business:

5000 WINNETTA AVENUE NORTH
NEW HOPE, MN 55428

New Principal Place of Business:

Current Mailing Address:

5000 WINNETTA AVENUE NORTH
NEW HOPE, MN 55428

New Mailing Address:

FEI Number: 41-0979117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CT () Delete
Name: NIMMER, BRUCE G
Address: 4940 VIKING DRIVE, SUITE 608
City-St-Zip: MINNEAPOLIS, MN 55434

Title: P () Delete
Name: STIRLEN, JIM
Address: 5000 WINNETKA AVE. N.
City-St-Zip: NEW HOPE, MN 55428

Title: VP () Delete
Name: TERRELL, KEVIN
Address: 5000 WINNETKA AVE. N.
City-St-Zip: NEW HOPE, MN 55428

Title: S () Delete
Name: HARTMAN, MORRIS J
Address: 5000 WINNETKA AVE. N.
City-St-Zip: NEW HOPE, MN 55428

Title: D () Delete
Name: KENWORTHY, PAUL
Address: 200 SOUTH 6TH STREET, SUITE 450
City-St-Zip: MINNEAPOLIS, MN 55405

Title: D () Delete
Name: MOSHOU, NORMAN
Address: N4795 1150TH STREET
City-St-Zip: PRESCOTT, WI 540217612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CH (X) Change () Addition
Name: NIMMER, BRUCE G
Address: 4940 VIKING DRIVE, SUITE 608
City-St-Zip: MINNEAPOLIS, MN 55434

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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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 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.

SIGNATURE: MORRIS J. HARTMAN

S

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date