2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003348

Entity Name: WEICHERT NEW HOMES CO.

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:	
	ETON ROAD LAINS, NJ 07	950			
Current Mailing Address:			New Mail	New Mailing Address:	
	ETON ROAD LAINS, NJ 07	950			
FEI Number:	22-2762064	FEI Number Applied For()	FEI Number Not App	olicable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	d Address of New Registered Agent:	
1203 HAYE TALLAHAS	S STREET SSEE, FL 3230				
The above in the State		submits this statement for the p	ourpose of changing	its registered office or registered agent, or both,	
SIGNATUR					
		ic Signature of Registered Age	ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () WEICHERT, JA 1625 RT 10 E MORRIS PLAIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () UDELL, JOHN 225 LITTLETON MORRIS PLAIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () CONSI, ANTHO 1625 RT 10 E MORRIS PLAIN		Title: Name: Address: City-St-Zip:	T (X) Change () Addition COX, JOHN J 1625 RT 10 E MORRIS PLAINS, NJ 07950	
Title: Name: Address: City-St-Zip:	S () KOCH, PAUL F 1625 RT 10 E MORRIS PLAIN		Title: Name: Address: City-St-Zip:	S (X) Change () Addition UDELL, JOHN 1625 RT 10 E MORRIS PLAINS, NJ 07950	
Title: Name: Address: City-St-Zip:	ASE () SULLIVAN, KAF 1625 RT 10 E MORRIS PLAIN		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ASE () LANAHAN, JOH 1625 RT 10 E MORRIS PLAIN		Title: Name: Address: City-St-Zip:	AST (X) Change () Addition HESSE, JOHN 1625 RT 10 E MORRIS PLAINS, NJ 07950	

I hereby certify that the information supplied with this filing does not qualify 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: KAREN SULLIVAN ASE 03/19/2009