2006 FOR PROFIT CORPORATION

Feb 27, 2006 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # F99000006704** 1. Entity Name HOMES IN OHIO, INC. Mailing Address Principal Place of Business 9 CORPORATION CENTER 9 CORPORATION CENTER **BROADVIEW HEIGHTS, OH 44147** BROADVIEW HEIGHTS, OH, 44147 01202006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 34-1716460 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 6. 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. I am (amiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title till applittable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PTCD TITLE INKS, DANIEL E MARKE 3817 CHAPLETON COURT STREET ADDRESS U00000450647 03/10/06-80014-007 150.00 CHY-ST-ZIP RICHFIELD, OH 44286 ٧D TITLE NAME REAGAN, GERALD A STREET ADDRESS 6555 ABERDEEN LANE Chry-ST-ZIP MEDINA, OH 44256 TITLE SD PALIGA, LAURA I NAME STREET ADDRESS 5920 CADY ROAD DO NOT WRITE CITY-ST-ZIP NORTH ROYALTON, OH 44133 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 at trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment

SIGNATURE?

DILE NAME STREET ADDRESS CITY-SI-ZIP

KING OFFICER OR DIR

212106

FILED

Daytime Phone #