2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # H31083 1. Enlity Name NEW WORLD HOMES, INC. Principal Place of Business 1335 RIVER ROAD W. GREEN COVE SPRINGS,, FL 32043 US DO NOT WRITE IN THIS SPACE

FILED Feb 08, 2006 08:00 AN Secretary of State

1335 RIVER Green Cove	ROAD W. PO BOX 8300 SPRINGS,, FL 32043 US ORANGE PARK,, FL	32006	US				
DO NOT WRITE IN THIS SPACE				02052006 4. FEI Number 59-2466	No Chg-P	CR2E0	34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
	6. Name and Address of Current Registered Agent	***************************************	<u> </u>				
FISH, GEORGE W 1335 RIVER ROAD W. GREEN COVE SPRINGS,, FL 32043			DO NOT WRITE IN THIS SPACE				
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 familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstang) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be			
10.	OFFICERS AND DIRECTORS						
ITTLE YAME STREET ADDRESS CITY-ST-ZIP	P FISH, GEORGE W 1335 RIVER ROAD W. GREEN COVE SPRINGS,, FL 32043						
TITLE VAME STREET ADDRESS CITY-ST-ZIP					U0000 02/18/06	042485 -80068	0 6-025 150.00
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12. 1 hereby c	ertify that the information supplied with this filling does not qualify	v for the exe	motions containe	d in Chanter 119	Florida Statutes I	further cer	tifu 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 efficer 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-06

(904)349-11/2