

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J07603

FILED
Jan 26, 2006
Secretary of State

Entity Name: STORY BOOK HOMES, INC.

Current Principal Place of Business:

4584 MERCANTILE AVE.,
STE D
NAPLES, FL 34104

New Principal Place of Business:

4584 MERCANTILE AVE.,
STE C
NAPLES, FL 34104

Current Mailing Address:

4584 MERCANTILE AVE.,
STE D
NAPLES, FL 34104

New Mailing Address:

4584 MERCANTILE AVE.,
STE C
NAPLES, FL 34104

FEI Number: 59-2661620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DONOVAN, WILLIAM A.
2664 AIRPORT ROAD, SOUTH
NAPLES, FL 33962 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: PD () Delete
Name: BEAUMONT, GARY R.,
Address: 189 CARIBBEAN RD.
City-St-Zip: NAPLES, FL 34108

Title: S () Delete
Name: BEAUMONT, SALLIE
Address: 189 CARIBBEAN RD.
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEAUMONT, GARY R.,
Address: 69 CYPRESS POINT DRIVE
City-St-Zip: NAPLES, FL 34105

Title: S (X) Change () Addition
Name: BEAUMONT, SALLIE
Address: 69 CYPRESS POINT DRIVE
City-St-Zip: NAPLES, FL 34105

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: GARY R. BEAUMONT

PD

01/26/2006

Electronic Signature of Signing Officer or Director

Date