2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035232

Entity Name: HOMES BY JONES, LLC

Apr 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5600 PGA BLVD., SUITE 204

PALM BEACH GÁRDENS, FL 33418

Current Mailing Address: New Mailing Address:

5600 PGA BLVD., SUITE 204 PALM BEACH GÁRDENS, FL 33418

FEI Number: 01-0759334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, MALCOLM F 5600 PGA BLVD., SUITE 204 PALM BEACH GÁRDENS, FL 33418 US

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

Title:

Name:

Address:

City-St-Zip:

JONES, MALCOLM F MGR

5600 PGA BLVD, SUITE 204

PALM BEACH GARDENS, FL 33418

(X) Change () Addition

MANAGING MEMBERS/MEMBERS:

() Delete JONES, MALCOLM F MGR Name: Address: 5600 PGA BLVD, SUITE 204 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete Name: HASEY, MARTIN J

Address: 5600 PGA BLVD., STE 204 City-St-Zip: PALM BEACH GARDENS, FL 33418

(X) Change () Addition Title: MGR

Name: HASEY, MARTIN J

ADDITIONS/CHANGES:

Address: 5600 PGA BLVD., STE 204

City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MALCOLM JONES 04/13/2005