2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT					ी निर्देशका	- M 187	ða er	
1. Entity Nam	MENT # L25449 STON HOMES, INC.				0.5	FILED PM	12: 47	
Principal Place of Business 3375 HWY 98 S BLDG A LAKELAND, FL 33803		Mailing Address 3375 HWY 98 S BLDG A LAKELAND, FL 33803 US			SE ^r TAL	CHLINISEE, F	ĹORIDA	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			06282005 Chg-P	CR2E034 (10/03)		
City & State		City & State			4. FEI Number 65-0177475		pplied For ot Applicable	
Zip Country		Zip Count		ry	5. Certificate of Status Desired	□ \$8.75 Ad	ditional	
Name and Address of Current Registered Agent				Name	7. Name and Address of New Re	gistered Agent		
WARREN, KENNETH B 3375 HWY 98 SOUTH BLDG A LAKELAND, FL 33803				Street Address (P.O. Box Number is Not Acceptable)				
	-,,							
				City	FL Zip Code			
8. 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								
Amended AR is \$61.25 9. Election Campaign Finar Trust Fund Contribution.				cing \$5. □ Add	. 00 May Be 2000573 ed to Fe@7/12/0501010	315992)015 **61	.25	
10.	OFFICERS AND DIRECTORS 11.			7/7	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTOR Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WARREN, KENNETH 3375 HWY 98 SOUTH, BLDG A LAKELAND, FL 33803	□ Detete		TADDRESS 3375	ren, Kenneth - Hwy 98 South, Blag 1 Iland, FL 33803	, •	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WARREN, STACEY 3375 HWY 98 S #A LAKELAND, FL 33803	□ Delete		T ADDRESS ST-ZIP LQK		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		T ADDRESS ST-ZIP VP MR7 440 LOK	valra, A.J. 9 Hallam Hill Cane Bland, FC 33813	: Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	4		,	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		T ADDRESS ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP		☐ Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of suppliemental figure 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 of the receiver by trysfee 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 ke empowered.								
SIGNATURE: 128/05								