

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007766

FILED
Mar 28, 2005
Secretary of State

Entity Name: PORTER GROUP HOMES INC

Current Principal Place of Business:

240 N 68TH WAY
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

15201 SW 18TH STREET
MIRAMAR, FL 33027 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTER, JANICE
15201 SW 18TH STREET
MIRAMAR, FL 33027 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PORTER, JANICE
Address: 15201 SW 18TH STREET
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP () Delete
Name: GIBBS, NORMA
Address: 15201 SW 18TH STREET
City-St-Zip: MIRAMAR, FL 33027 US

Title: T () Delete
Name: HACKSHAW, LISA
Address: 8811 SW 13TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANICE PORTER

P

03/28/2005

Electronic Signature of Signing Officer or Director

Date