## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000000119

FILED Apr 21, 2009 Secretary of State

Entity Name: PARTNERSHIP FOR BUILDING HOMES INC

Current Principal Place of Business:		New Principal Place of Business:		
	COLLINS AVE	ENUE		
04 BUNNY IS	SLES, FL 33160	)		
urrent N	lailing Addres	s:	New Mailing Addres	s:
	COLLINS AVE	ENUE		
04 BUNNY IS	SLES, FL 33160	)		
El Number	: 20-2112183	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
RITO, RI	EGLA			
04	COLLINS AVE SLES, FL 33160			
04 SUNNY IS The above	SLES, FL 33160	) US	purpose of changing its registere	ed office or registered agent, or both
04 SUNNY IS the above the State	SLES, FL 33160 e named entity se of Florida.	) US	purpose of changing its registere	ed office or registered agent, or both
04 UNNY IS he above i the Stat	SLES, FL 33160 named entity se of Florida. RE:	) US		ed office or registered agent, or both Date
04 SUNNY IS The above The Stati	SLES, FL 33160 named entity se of Florida. RE:	US Submits this statement for the lic Signature of Registered Ac	gent	
04 SUNNY IS The above The Stati	e named entity se of Florida.  RE: Electron S AND DIREC  D () POL, EDWARD	O US submits this statement for the lic Signature of Registered Actor TORS:  Delete G LINS AVENUE #204	gent	Date
04 UNNY IS he above the State IGNATU  PFFICER tte: ame: ddress:	e named entity se of Florida.  RE:  Electron  S AND DIREC  D ()  POL, EDWARD 16850-112 COL SUNNY ISLES, D () EIZMENDIZ, SH	D US submits this statement for the submits this statement for the signature of Registered Actor TORS:  Delete G LINS AVENUE #204 FL 3310 US  Delete HEENA LINS AVENUE #204	pent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REGLA BRITO D 04/21/2009