2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000712

Entity Name: MASA GROUP HOMES INC.

CRICHLOW, ROBERTO

2005 CRICKET DR

TRE

ORLANDO, FL 32808

BRITTON, BERNADETTE

1198 VILLAGE FOREST PL

WINTER PARK, FL 32792

() Delete

Name:

Title:

Name:

Address: City-St-Zip:

Address:

City-St-Zip:

FILED Apr 26, 2007 Secretary of State

| Current Principal Place of Business: | | | | | New Principal Place of Business: | | | |
|--|---|-----------|---------------------------|-----------|--|---|---------------------------|--------------|
| 329 KIRKO WINTER S | CALDY DR SPRINGS, FL | 32708 | | | | SON PARK BL , FL 32829 | VD | |
| Current Mailing Address: | | | | | New Mailing Address: | | | |
| 329 KIRKCALDY DR WINTER SPRINGS, FL 32708 | | | | | 3731 BENSON PARK BLVD ORLANDO, FL 32829 | | | |
| FEI Number: | 20-1670706 | FEI Nu | mber Applied For() | FEI Num | ber Not Appl | icable () | Certificate of Status Des | ired () |
| Name and Address of Current Registered Agent: | | | | | Name and Address of New Registered Agent: | | | |
| CRAIG, MARCIA 329 KIRKCALDY DR WINTER SPRINGS, FL 32708 US | | | | | CRAIG, MARCIA 3731 BENSON PARK BLVD ORLANDO, FL 32829 US | | | |
| | named entity of Florida. | submits | this statement for the pu | urpose of | changing it | ts registered o | ffice or registered ager | nt, or both, |
| SIGNATURE: | | | | | 04/26/2007 | | | |
| | Electro | nic Signa | ture of Registered Ager | nt | | | Date | |
| OFFICERS AND DIRECTORS: | | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | P (CRAIG, MARC 329 KIRKCALE WINTER SPRI | DY DR | 32708 | | Title: Name: Address: City-St-Zip: | P (X) CRAIG, MARCI 3731 BENSON ORLANDO, FL | PARK BLVD | |
| Title: Name: Address: City-St-Zip: | ADM (WILLIAMS, NIO 329 KIRKCALI WINTER SPRI | DY DR | 32708 | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| Title [.] | VP (|) Delete | | | Title: | () | Change () Addition | |

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: MARCIA CRAIG P 04/26/2007

() Change () Addition