

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39481

FILED
Feb 10, 2005
Secretary of State

Entity Name: ACREAGE BUILDERS ASSOCIATION, INC.

Current Principal Place of Business:

1128 ROYAL PALM BEACH BLVD
PMB 105
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

1128 ROYAL PALM BEACH BLVD
PMB 105
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-0425203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNZ, MIKE
132 SW. CASSINE CT
PALM CITY, FL 34990 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: PD () Delete
Name: KEISER, FRANK
Address: 13498 JONQUIL PL
City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete
Name: TANEN, HARRY
Address: 13695 CALLINGTON DR
City-St-Zip: WELLINGTON, FL 33414

Title: TSD () Delete
Name: MUNZ, MIKE
Address: 132 SW. CASSINE CT.
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GERALD, ADAMS
Address: 6142 ROYAL PALM BEACH BLVD.
City-St-Zip: WEST PALM BEACH, FL 33412

Title: PD (X) Change () Addition
Name: TANEN, HARRY
Address: 13695 CALLINGTON DR
City-St-Zip: WELLINGTON, FL 33414

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: MIKE MUNZ

TSD

02/10/2005

Electronic Signature of Signing Officer or Director

Date