2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005137

Entity Name: HOMES FOR HILLSBOROUGH, INC.

FILED Jan 06, 2004 Secretary of State

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Current P	rincipal Place of Business:	New Princ	ipal Place of Business:
201 14TH A			
RUSKIN, F	FL 33570 US		
Current M	ailing Address:	New Maili	ng Address:
P.O. BOX RUSKIN, F			
FEI Number:	59-3211393 FEI Number Applied For () FEI	Number Not App	icable () Certificate of Status Desired (X)
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
GOLDSTE 4255 W. H TAMPA, FI	UMPHREY ST #314		
	named entity submits this statement for the purpose of Florida.	se of changing i	ts registered office or registered agent, or both,
SIGNATUR			
	Electronic Signature of Registered Agent		Date
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	TD () Delete JORN, EVAN L 2519 PALM DR TAMPA, FL 33629	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition JORN, EVAN L 2519 PALM DR TAMPA, FL 33629
Title: Name: Address: City-St-Zip:	PD () Delete CLARK, CHARLOTTE 1525 RICKENBECKER DR SUN CITY CENTER, FL 33673	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition CLARK, CHARLOTTE 1525 RICKENBECKER DR SUN CITY CENTER, FL 33673
Title: Name: Address: City-St-Zip:	D () Delete CRUZ, MATIAS P.O. BOX 77151 TAMPA, FL 33675	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SHEA, DON 2027 DOCKSIDE DRIVE VALRICO, FL 33594
Title: Name: Address: City-St-Zip:	D () Delete GOLDSTEIN, DAVID 4255 W. HUMPHREY ST. #314 TAMPA, FL 33614	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete DE LA ROSA, IDA 1610 1ST ST SW RUSKIN, FL 33570	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete CONDOROUSIS, NICHOLAS 811 S GROVE PARK AVE TAMPA, FL 33609	Title: Name: Address: City-St-Zip:	() Change () Addition

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: EVAN JORN PD 01/06/2004