2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# N93000005137

Entity Name: HOMES FOR HILLSBOROUGH, INC.

Current Principal Place of Business:

201 14TH AVE S.E.
SUITE H
RUSKIN, FL 33570 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 771
RUSKIN, FL 33570 US

New Mailing Address:

FEI Number: 59-3211393 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GOLDSTEIN, DAVID
4255 W. HUMPHREY ST #314
TAMPA, FL 33614 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:	JORN, EVAN L	
Address:	2519 PALM DR	
City-St-Zip:	TAMPA, FL 33629	
Title:	TD	( ) Delete
Name:	CLARK, CHARLOTTE	
Address:	1525 RICKENBECKER DR	
City-St-Zip:	SUN CITY CENTER, FL 33673	
Title:	D	( ) Delete
Name:	SHEA, DON	
Address:	2027 DOCKSIDE DRIVE	
City-St-Zip:	VALRICO, FL 33594	
Title:	D	( ) Delete
Name:	GOLDSTEIN, DAVID	
Address:	4255 W. HUMPHREY ST. #314	
City-St-Zip:	TAMPA, FL 33614	
Title:	D	( ) Delete
Name:	DE LA ROSA, IDA	
Address:	1610 1ST ST SW	
City-St-Zip:	RUSKIN, FL 33570	
Title:	D	( ) Delete
Name:	CONDOROUSIS, NICHOLAS	
Address:	811 S GROVE PARK AVE	
City-St-Zip:	TAMPA, FL 33609	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	BURKE, EILEEN	
Address:	220 12TH STREET SE	
City-St-Zip:	RUSKIN, FL 33570	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	JACKSON, HAZEL	
Address:	10311 SUMMERVIEW CIRCLE	
City-St-Zip:	RIVERVIEW, FL 33569	

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 02/22/2005

Electronic Signature of Signing Officer or Director — Date