2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001963

FILED Feb 15, 2005 Secretary of State

Entity Name: SOUTHWEST UNITED COMMUNITIES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
SUITE 20				
ORLAND	O, FL 32811			
Current Mailing Address:		New Mailing Address:		
SUITE 20	RKMAN RD 2 O, FL 32811			
FEI Numbe	r: 59-3329576	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
PAGE, EF 4271 SCH ORLAND		US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the particular state of Registered Agr		ed office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida.	nic Signature of Registered Ag	ent	
in the Stat SIGNATU OFFICER Title: Name: Address:	e of Florida. RE: Electro	nic Signature of Registered Ago CTORS:) Delete JIS A R ST	ent	Date
in the Stat SIGNATU	Electron S AND DIRECT D (HOWARD, LOI 4266 BOOKER ORLANDO, FL	nic Signature of Registered Agr ETORS:) Delete JIS A R ST 32811) Delete JL RD ST	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
in the Stat SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	E of Florida. RE: Electroi S AND DIRECT D (HOWARD, LOU 4266 BOOKER ORLANDO, FL D (SULUKI, ABDU 1517 GUINYAF ORLANDO, FL	nic Signature of Registered Age CTORS:) Delete UIS A R ST 32811) Delete UL RD ST 32805) Delete ETHA B STREET	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () 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: ABDUL SULUKI D 02/15/2005