**2006 FOR PROFIT CORPORATION ANNUAL REPORT** 

DOCUMENT # P0000005336

1. Entity Name

CREATIVE CHOICE HOMES XXII, INC.



Mailing Address

4243NORTHLAKEBLVD.,STE.D PALMBEACHGARDENS,FL33410

Principal Place of Business

4243NORTHLAKEBLVD..STE.D PALMBEACHGARDENS,FL33410 FILED

2006 MAR 27 AH 9: 23

SECRETARY OF STATE TĂĔĔĀĦĀŠŠĖĔ, FĔŎŔĺĎĄ



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No Chg-P

CR2E034 (11/05)

4. FEI Number 65-6325883

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BAROT, DILIP 4243 NORTHLAKE BLVD., STE. D PALM BEACH GARDENS, FL 33410

## DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the pations of registered agent.	urpose of changing its req	gistered office or re	egistered agent, or both,	, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title i	f applicable. (NOTE: Re	agistered Agent signature	(equired when reinstating)	OATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.   \$5.00 May Be Added to Fees			
10.	D. OFFICERS AND DIRECTORS			······································	
TITLE	DP				
NAME	BAROT, DILIP				
STREET ADDRESS	4243 NORTHLAKE BLVD., STE. D				
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410				
TITLE	SVP			Fig. 1	00069632396
NAME	WEIR, JOHN F				/0501041001 **158.75
STREET ADDRESS	4243 NORTHI AKE BLVD. STE. D.			יטיט זריט,	/ DO OTD41DDI ##190.19

## DO NOT WRITE IN THIS SPACE

PALM BEACH GARDENS, FL 33410 CITY-ST-ZIP TITLE KAKKAR, YASH PAL NAME STREET ADDRESS 4243 NORTHLAKE BLVD., STE. D PALM BEACH GARDENS, FL 33410 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 titls report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Yash Pal Kakkar, Secretary SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER R DIRECTOR *3*/09/06

(561) 627-7988

Daytime Phone #