2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 27, 2006 08:00 AM Secretary of State **DOCUMENT # P00000085038** 1. Entity Name HERITAGE OAKS DEVELOPMENT COMPANY Mailing Address Principal Place of Business 300 E NEW HAVEN AVE 300 E NEW HAVEN AVE MELBOURNE, FL 32901 MELBOURNE, FL 32901 No Chg-P CR2E034 (11/05) 01062006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3669459 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PENCE, ROY J DO NOT WRITE 300 E NEW HAVEN AVE MELBOURNE, FL 32901 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NDTE: Registered Agent signature required when reinstaling) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 *U*00000448625 Trust Fund Contribution. Added to Fees 03/09/06-80020-021 150.00 OFFICERS AND DIRECTORS 10 D TITLE PENCE, ROY J NAME 300 E NEW HAVEN AVE STREET ADDRESS MELBOURNE, FL 32901 CSTY-ST-ZP **PST** TITLE PENCE, ROY J NAME 300 E NEW HAVEN AVE STREET ADDRESS MELBOURNE, FL 32901 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADURESS CITY-ST-ZIP 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 calls; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 807, 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.

SIGNATURE:

NAXE STREET ADDRESS CITY-S7-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED