

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 8:00 am
Secretary of State

03-07-2005 90268 029 ***158.75

DOCUMENT # P00000111747					
1. Entity Name FLORIDA GOLD HOMES, INC.					
Principal Place of Business 3579 S MC CALL ROAD SUITE G ENGLEWOOD, FL 34224			Mailing Address 3579 S MC CALL ROAD SUITE G ENGLEWOOD, FL 34224		
2. Principal Place of Business 2960 S. MC CALL RD SUITE 106 ENGLEWOOD FL		3. Mailing Address 2960 S. MC CALL RD SUITE 106 ENGLEWOOD FL			
Suite, Apt. #, etc. SUITE 106		Suite, Apt. #, etc. SUITE 106		02162005 --Chg-P-- CR2E034 (10/03)	
City & State ENGLEWOOD FL		City & State ENGLEWOOD FL		4. FEI Number 65-1079406	
Zip 34224		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBINSON, DIANA 3579 S MC CALL ROAD SUITE G ENGLEWOOD, FL 34224			7. Name and Address of New Registered Agent Name: GORDON ROBINSON Street Address (P.O. Box Number is Not Acceptable): 2960 S. MC CALL ROAD SUITE 106 City: ENGLEWOOD FL 34224		
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: <u>GORDON ROBINSON</u> DATE: <u>2/16/05</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBINSON, DIANA 3579 S ACCESS ROAD SUITE G ENGLEWOOD, FL 34224	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBINSON GORDON 2960 S MC CALL ROAD SUITE 106 ENGLEWOOD FL 34224	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 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.					
SIGNATURE: <u>GORDON ROBINSON</u>			Date: <u>2/16/05</u> Daytime Phone #: <u>941-476-0555</u>		