
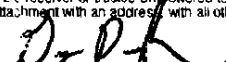


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DOCUMENT # P01000025914																																									
1. Entity Name ESTATE HOME BUILDERS, INC.																																									
Principal Place of Business 78 MENTOR DRIVE NAPLES, FL 34110		Mailing Address 78 MENTOR DRIVE NAPLES, FL 34110																																							
2. Principal Place of Business		3. Mailing Address																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																							
City & State		City & State		4. FEI Number 59-3705009																																					
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																					
DARRAGH, GREG 78 MENTOR DRIVE NAPLES, FL 34110				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																					
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 <small>Signature typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent's signature required when appointing)</small> <small>DATE</small>																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																					
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th colspan="3" style="text-align: left; padding: 5px;">10. OFFICERS AND DIRECTORS</th><th colspan="3" style="text-align: left; padding: 5px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th></tr></thead><tbody><tr><td style="width: 20%; padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="width: 60%; padding: 5px;">D DARRAGH, GREG 78 MENTOR DRIVE NAPLES, FL 34110</td><td style="width: 20%; padding: 5px;"><input type="checkbox"/> Delete</td><td style="width: 20%; padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="width: 60%; padding: 5px;"></td><td style="width: 20%; padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">D DARRAGH, JEFF 6070 20TH AVENUE, NW NAPLES, FL 34119</td><td style="padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;"></td><td style="padding: 5px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr></tbody></table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARRAGH, GREG 78 MENTOR DRIVE NAPLES, FL 34110	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARRAGH, JEFF 6070 20TH AVENUE, NW NAPLES, FL 34119	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	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	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	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
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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: 				4-29-03 119-593-7135																																					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																									