


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000039275 1. Entity Name HOMES 4 SALE D. C., INC.	
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Principal Place of Business 2629 RIDGECREST AVE. ORANGE PARK, FL 32065	Mailing Address 2629 RIDGECREST AVE. ORANGE PARK, FL 32065
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent DONALD W. DUNCAN, P.A. 25 FLORIDA PARK DR. NORTH PALM COAST, FL 32137	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000089111 03/15/04-80080-003 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARROLL, DENISE 2629 RIDGECREST AVE. ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MURPHY, JUDY K 2629 RIDGECREST AVE ORANGE PARK, FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARROLL, THOMAS III 11335 RUSTIC PINES CIR E JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BINKLEY, TAMMY J 1554 BEECHER LN ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **3/13/04 (604)349-0034**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #