2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000053542

Entity Name: MARK HALL HOMES, INC.

FILED Mar 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5305 LENIOR COURT 5005 THONOTOSASSA ROAD PLANT CITY, FL 33567 PLANT CITY, FL 33565

Current Mailing Address: New Mailing Address:

P.O. BOX 4586 5005 THONOTOSASSA ROAD PLANT CITY, FL 33563 PLANT CITY, FL 33565

FEI Number: 59-3749127 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALL, MARK A
5305 LENIOR COURT
PLANT CITY, FL 33566 US
HALL, MARK A
5005 THONOTOSASSA ROAD
PLANT CITY, FL 33565 US

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.

SIGNATURE: MARK A HALL 03/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete Title: DP (X) Change () Addition

Name:HALL, MARK AName:HALL, MARK AAddress:5305 LENIOR COURTAddress:5005 THONOTOSASSA ROAD

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: PLANT CITY, FL 33565

Title: DV () Delete Title: DV (X) Change () Addition Name: HALL, MARY L Name: HALL, MARY L

Name: HALL, MARY L Name: HALL, MARY L
Address: 5305 LENIOR COURT Address: 5005 THONOTOSASSA ROAD

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: PLANT CITY, FL 33565

Title: DT () Delete Title: T (X) Change () Addition Name: WELDY, MARSHALL C Name: HALL, MARK A

Address: 5305 LENOIR CT Address: 5005 THONOTOSASSA ROAD

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: PLANT CITY, FL 33565

Title: DS () Delete Title: S (X) Change () Addition Name: WELDY, PATRICIA A Name: HALL, MARY L

 Address:
 5305 LENOIR CT
 Address:
 5005 THONOTOSASSA ROAD

 City-St-Zip:
 PLANT CITY, FL 33565
 City-St-Zip:
 PLANT CITY, FL 33565

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK A HALL DPT 03/07/2005