2006 FOR PROFIT CORPORATION

FILED DOCUMENT # P01000087472 May 08, 2006 08:00 A Secretary of State 1. Entity Name RICHARD DOUGLAS HOMES, INC. Principal Place of Business Mailing Address 12827 CASTLEMAINE DRIVE 12827 CASTLEMAINE DRIVE TAMPA, FL 33626 TAMPA, FL 33626 No Chg-P CR2E034 (11/05) 04252006 Applied For 4. FEI Number 59-3743805 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required **** 6. Name and Address of Current Registered Agent **UHLE, RICHARD D** DO NOT WRI 12827 CASTLEMAINE DRIVE **TAMPA, FL 33626** * IN THIS SPACE THE PARTY OF THE P 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS דפת TITLE UHLE, RICHARD D HAME STREET ADDRESS 12827 CASTLEMAINE DRIVE U00000563419. CITY-ST-ZIP **TAMPA, FL 33626** ***05/20/06#80010#021#150:00# TITLE UHLE. KIMBERLY A NAME STREET ADDRESS 12827 CASTLEMAINE DRIVE CITY-ST-ZIP TAMPA, FL 33626 TITLE NAME STREET ADDRESS DO NOT WR CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 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, of on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SK 4G-OWERCER OR DERECTOR