2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 17, 2005
Secretary of State

DOCUMENT# P01000095616

Entity Name: COVENANT HOMES OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

3901 WINTERHAWK CT.
SAINT AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

3901 WINTERHAWK CT.
SAINT AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-3751098 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DRUDI, LISA
410 SEGOVIA ROAD
SAINT AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

DRUDI, LISA
3901 WINTERHAWK DRIVE
SAINT AUGUSTINE, FL 32086 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: _____ 10/17/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DRUDI, LISA
Address: 410 SEGOVIA ROAD
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: S ( ) Delete
Name: FORTSON, MARK
Address: 26664 LITTLE JOHN CT, #92
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T ( ) Delete
Name: WOESSNER, SEAN C
Address: 410 SEGOVIA ROAD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP ( ) Delete
Name: DRUDI, RICHARD III
Address: 410 SEGOVIA RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DRUDI, LISA
Address: 3901 WINTERHAWK DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: T (X) Change ( ) Addition
Name: FORTSON, MARK
Address: 26664 LITTLE JOHN CT, #92
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S (X) Change ( ) Addition
Name: WOESSNER, SEAN C
Address: 3901 WINTERHAWK DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP (X) Change ( ) Addition
Name: DRUDI, RICHARD III
Address: 148 NESMITH AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: LISA DRUDI P 10/17/2005
Electronic Signature of Signing Officer or Director — Date