

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106418

Entity Name: TAMPA BAY HOMES CO.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

24047 TURTLE ROCK CT  
LUTZ, FL 33559

## New Principal Place of Business:

18502 KEYSTONE MANOR ROAD  
ODESSA, FL 33556

## Current Mailing Address:

24047 TURTLE ROCK CT  
LUTZ, FL 33559

## New Mailing Address:

18502 KEYSTONE MANOR ROAD  
ODESSA, FL 33556

FEI Number: 30-0009044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RITUMS, JOHN  
24047 TURTLE ROCK CT  
LUTZ, FL 33559 US

## Name and Address of New Registered Agent:

RITUMS, JOHN  
18502 KEYSTONE MANOR ROAD  
ODESSA, FL 33556 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:

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: RITUMS, JOHN  
Address: 24047 TURTLE ROCK CT  
City-St-Zip: LUTZ, FL 33559

Title: VTD ( ) Delete  
Name: MALONE, SILVA  
Address: 24047 TURTLE ROCK CT  
City-St-Zip: LUTZ, FL 33559

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: RITUMS, JOHN  
Address: 18502 KEYSTONE MANOR ROAD  
City-St-Zip: ODESSA, FL 33556

Title: VTD (X) Change ( ) Addition  
Name: MALONE, SILVA  
Address: 18502 KEYSTONE MANOR ROAD  
City-St-Zip: ODESSA, FL 33556

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: JOHN RITUMS

PSD

04/20/2005

Electronic Signature of Signing Officer or Director

Date