## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000004529

City-St-Zip:

SHERTZ, TX 78154

FILED Apr 18, 2005 Secretary of State

Entity Name: RIVER BEND HOME BUILDERS CORP.							
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
4495 EMER	RALD VISTA						
_	RTH, FL 33461						
Current Mailing Address:			New Maili	New Mailing Address:			
4495 EMERALD VISTA							
	RTH, FL 33461						
FEI Number:	60-0001586 FI	El Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired (	)	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
HAWKINS, LAWRENCE B 9202 OLMSTEAD DR LAKE WORTH, FL 33467 US			4495 EMER SUITE 2	HAWKINS, LAWRENCE B 4495 EMERALD VISTA SUITE 2 LAKE WORTH, FL 33461 US			
The above in the State		nits this statement for the pu	ırpose of changing i	ts registered o	office or registered agent, or	both,	
SIGNATURE:				04/18/2005			
	Electronic S	ignature of Registered Ager	nt		Date		
Election Can	npaign Financing Tru	st Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () Dele HAWKINS, LAWREN 9202 OLMSTEAD DI LAKE WORTH, FL	NCE B RIVE	Title: Name: Address: City-St-Zip:	HAWKINS, LA	.D VISTA, SUITE 2		
Title: Name: Address: City-St-Zip:	D (X) Dele HAWKINS, LARRY F 1021 NW 60TH STR GAINESVILLE, FL 3	( EET	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition		
Title: Name: Address:	VP () Dele LEAL, RICHARD A 1140 DIMROCK	ete	Title: Name: Address:	(	) Change ()Addition		

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.

City-St-Zip:

SIGNATURE: LAWRENCE B HAWKINS Ρ 04/18/2005