

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058310

FILED  
Feb 22, 2005  
Secretary of State

Entity Name: JESSOP HOMES, INC.

**Current Principal Place of Business:**

1596 N LAKE SHIPP DR SW  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

1596 N LAKE SHIPP DR SW  
WINTER HAVEN, FL 33880

**New Mailing Address:**

FEI Number: 20-0530729

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JESSOP, ERIC  
1596 N LAKE SHIPP DR SW  
WINTER HAVEN, FL 33880 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: JESSOP, ERIC  
Address: 1596 N LAKE SHIPP DR SW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: V (X) Delete  
Name: FLOYD, JOSEPH L  
Address: 913 SCHOOL HOUSE RD  
City-St-Zip: LAKELAND, FL 33813

Title: V ( ) Delete  
Name: JESSOP, MELISSA  
Address: 1596 N LAKE SHIPP DR SW  
City-St-Zip: WINTER HAVEN, FL 33880

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ERIC JESSOP

PD

02/22/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date