

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126531

FILED
Jan 22, 2004
Secretary of State

Entity Name: VISION HOMES 20 / 20 INC.

Current Principal Place of Business:

2372 S.W. INDEPENDENCE ROAD
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

2372 S.W. INDEPENDENCE ROAD
1971 SE PORT ST. LUCIE BLVD
PORT ST. LUCIE, FL 34953

Current Mailing Address:

2372 S.W. INDEPENDENCE ROAD
PORT ST. LUCIE, FL 34953

New Mailing Address:

2372 S.W. INDEPENDENCE ROAD
1971 SE PORT ST. LUCIE BLVD
PORT ST. LUCIE, FL 34953

FEI Number: 22-3884788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARON, LONNIE R C.P.A.
5250 LAS VERDES CIRCLE
UNIT 115
DELRAY BEACH, FL 33484

Name and Address of New Registered Agent:

SINES, ELLEN
1971 SE PORT ST. LUCIE BLVD
PORT ST. LUCIE, FL 34952

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: ELLEN SINES

01/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GEISINGER, BERT
Address: 2372 S.W. INDEPENDENCE ROAD
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: V (X) Delete
Name: MCCARTHY, JOHN
Address: 2372 S.W. INDEPENDENCE ROAD
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GEISINGER, BERTRAM L DR
Address: 26 BEACON STREET
City-St-Zip: SHIRLEY, NY 11967

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: BERTRAM L. GEISINGER

DR

01/22/2004

Electronic Signature of Signing Officer or Director

Date