

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000126531

Entity Name: VISION HOMES 20 / 20 INC.

FILED
Nov 02, 2005
Secretary of State

Current Principal Place of Business:

686 SW DWYER AVENUE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

509 SW SATURN COURT
PORT ST. LUCIE, FL 34953

Current Mailing Address:

P O BOX 2757
FORT PIERCE, FL 34954

New Mailing Address:

509 SW SATURN COURT
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:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVENUE
SUITE 1500
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

GEISINGER, BERTRAM L DR
509 SW SATURN COURT
PORT ST. LUCIE, FL 34953 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: BERTRAM L. GEISINGER

11/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: VP () Delete
Name: MCCARTHY, JOHN
Address: 2372 SW 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: 509 SW SATURN COURT
City-St-Zip: PORT ST. LUCIE, FL 34953

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

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11/02/2005

Electronic Signature of Signing Officer or Director

Date