2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011104

Entity Name: FLORIDA HOME MORTGAGE SOLUTIONS, INC.

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10 SE CENTRAL PARKWAY STE 130 517 EBBTIDE DRIVE

STUART, FL 34994 NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

7675 SE CROSSRIP ST. 517 EBBTIDE DRIVE

HOBE SOUND, FL 33455 NORTH PALM BEACH, FL 33408

FEI Number: 46-0515723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHULTE, SHIRLEY
7675 SE CROSSRIP ST.
SCHULTE, SHIRLEY
517 EBBTIDE DRIVE

HOBE SOUND, FL 33455 US NORTH PALM BEACH, FL 33408 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: SHIRLEY K. SCHULTE 02/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: SCHULTE, SHIRLEY Name: SCHULTE, SHIRLEY
Address: 7675 SE CROSSRIP ST. Address: 517 EBBTIDE DRIVE

City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: NORTH PALM BEACH, FL 33408

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: SHIRLEY K. SCHULTE DIR 02/08/2005