

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025299

FILED
Mar 30, 2004
Secretary of State

Entity Name: CLASSIC HOMES INTERNATIONAL GROUP, INC.

Current Principal Place of Business:

7380 SANDLAKE RD STE 500
ORLANDOT, FL 32819

New Principal Place of Business:

7380 SANDLAKE ROAD
SUITE 500
ORLANDO, FL 32819

Current Mailing Address:

7380 SANDLAKE RD STE 500
ORLANDOT, FL 32819

New Mailing Address:

7380 SAND LAKE ROAD
SUITE 500
ORLANDO, FL 32819

FEI Number: 57-1181926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHEATLEY, ALISON
7380 SANDLAKE ROAD
SUITE 500
ORLANDO, FL 32819 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: WHEATLEY, ALISON
Address: 7380 SANDLAKE RD STE 500
City-St-Zip: ORLANDO, FL 32819 US

Title: D () Delete
Name: JONES, ANNE
Address: 3 BARNSTAPLE CLOSE, OAKWOOD
City-St-Zip: DERBY, UK DE21 2PQ,

Title: D () Delete
Name: JONES, DAVID
Address: 3 BARNSTAPLE CLOSE, OAKWOOD
City-St-Zip: DERBY, UK DE21 2PQ,

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: ALISON WHEATLEY

PD

03/30/2004

Electronic Signature of Signing Officer or Director

Date