

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068726

Entity Name: DESIGNER HOMES, INC.

FILED
Feb 18, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 15624
BROOKSVILLE, FL 34604

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15624
BROOKSVILLE, FL 34604

New Mailing Address:

FEI Number: 20-0051689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENTZ, H. JAMES ESQ.
LENTZ & ASSOCIATES, P.A.
35111 US HWY. 19 NORTH, SUITE 302
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

LENTZ, H. JAMES ESQ.
LENTZ & ASSOCIATES, P.A.
35095 US HWY 19 N. SUITE 101
PALM HARBOR, FL 34684 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:

Electronic Signature of Registered Agent

02/18/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: PFLEGER, DONALD
Address: PO BOX 15624
City-St-Zip: BROOKSVILLE, FL 34604

Title: D (X) Delete
Name: PFLEGER, DAVID
Address: P.O. BOX 15624
City-St-Zip: BROOKSVILLE, FL 34604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: PFLEGER, DAVID W
Address: PO BOX 15624
City-St-Zip: BROOKSVILLE, FL 34604

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: DAVID W. PFLEGER

Electronic Signature of Signing Officer or Director

PSTD

02/18/2005

Date