

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095599

FILED
Jun 10, 2005
Secretary of State

Entity Name: TREASURE COAST HITECH HOMES, INC.

Current Principal Place of Business:

8998 SE STAR ISLAND WAY
HOBE SOUND, FL 33455

New Principal Place of Business:

P.O. BOX 1817
HOBE SOUND, FL 33455

Current Mailing Address:

8998 SE STAR ISLAND WAY
HOBE SOUND, FL 33455

New Mailing Address:

P.O. BOX 1817
HOBE SOUND, FL 33455

FEI Number: 06-1707195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIAZZA, DEBBIE
8998 SE STAR ISLAND WAY
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

PIAZZA, DEBBIE
10581 SE JUPITER NARROWS DRIVE
HOBE SOUND, FL 33455 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: DEBBIE PIAZZA

06/10/2005

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: D () Delete
Name: PIAZZA, DEBBIE
Address: 8998 SE STAR ISLAND WAY
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: CLAMPITT, KIRK
Address: 8998 SE STAR ISLAND WAY
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PIAZZA, DEBBIE
Address: P.O. BOX 1817
City-St-Zip: HOBE SOUND, FL 33455

Title: D (X) Change () Addition
Name: CLAMPITT, KIRK
Address: P.O. BOX 1817
City-St-Zip: HOBE SOUND, FL 33455

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: DEBBIE PIAZZA

O/D

06/10/2005

Electronic Signature of Signing Officer or Director

Date