2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004
Secretary of State

DOCUMENT# P03000130706

Entity Name: A PLACE IN THE SUN HOMES, INC.

Current Principal Place of Business:

929 JASMINE ST
CELEBRATION, FL 34747

New Principal Place of Business:

5503 W. IRLO BRONSON HWY
KISSIMMEE, FL 34746

Current Mailing Address:

929 JASMINE ST
CELEBRATION, FL 34747

New Mailing Address:

3328 CALLERTON ROAD
CLERMONT, FL 34711

FEI Number: 77-0613242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAYES, ROBERT S
441 W VINE ST
KISSIMMMEE, FL 34741 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: DPT ( ) Delete
Name: LONGFIELD, MICHAEL
Address: 929 JASMINE ST
City-St-Zip: CELEBRATION, FL 34747

Title: DVS ( ) Delete
Name: AGOSTON LONGFIELD, AVA
Address: 929 JASMINE ST
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: LONGFIELD, MICHAEL
Address: 3328 CALLERTON ROAD
City-St-Zip: CLERMONT, FL 34711

Title: DVS (X) Change ( ) Addition
Name: AGOSTON LONGFIELD, AVA
Address: 3328 CALLERTON ROAD
City-St-Zip: CLERMONT, FL 34711

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: MICHAEL THOMAS LONGFIELD DPT 04/20/2004
Electronic Signature of Signing Officer or Director Date