2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013318

Entity Name: AFFORDABLE HOME REMODELING AND REPAIRS, INC.

FILED Jan 14, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1604 STOCKTON STREET JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

1604 STOCKTON STREET JACKSONVILLE, FL 32204

FEI Number: 03-0539399 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:

ROBERTS, WILLIAM R ROBERTS, WILLIAM R 1604 STOCKTON STREET 4275 GENÓA AVE. JACKSONVILLE, FL 32204 US JACKSONVILLE, FL 32210 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: WILLIAM R. ROBERTS 01/14/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DEAN, HENRY E III Name: Name: DEAN, HENRY E III 1604 STOCKTON STREET 1604 STOCKTON STREET Address: Address: City-St-Zip:

JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204

Title: Title: DVP (X) Change () Addition () Delete Name: ROBERTS, WILLIAM R Name: ROBERTS, WILLIAM R

1604 STOCKTON STREET 4275 GENOA AVE. Address: Address: JACKSONVILLE, FL 32204 JACKSONVILLE, FL 32210 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

CORBIN, N.B. JR. Name: CORBIN, N.B. JR. Name: 1604 STOCKTON STREET 1604 STOCKTON STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204

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: WILLIAM R. ROBERTS DVP 01/14/2005