2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

DOCUMENT# P04000016939

Entity Name: FIRST CHOICE FLORIDA VILLAS, INC

Current Principal Place of Business:

3109 PASTURE ROAD
KISSIMMEE, FL 34746 US

New Principal Place of Business:

1668 WATERVIEW LOOP
HAINES CITY, FL 33844 US

Current Mailing Address:

3109 PASTURE ROAD
KISSIMMEE, FL 34746 US

New Mailing Address:

1668 WATERVIEW LOOP
HAINES CITY, FL 33844 US

FEI Number: 20-0670051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, JOSEPH
3109 PASTURE ROAD
KISSIMMEE, FL 34746 US

Name and Address of New Registered Agent:

COX, JOSEPH
1668 WATERVIEW LOOP
HAINES CITY, FL 33844 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: JOSEPH COX 01/12/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COX, JOSEPH
Address: 3109 PASTURE ROAD
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VD ( ) Delete
Name: HUNTER, MICHAEL
Address: 3109 PASTURE ROAD
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COX, JOSEPH
Address: WATERVIEW LOOP
City-St-Zip: HAINES CITY, FL 33844 US

Title: VD (X) Change ( ) Addition
Name: HUNTER, MICHAEL
Address: 3109 PASTURES ROAD
City-St-Zip: KISSIMMEE, FL 34746

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: JOESPH COX P 01/12/2005
Electronic Signature of Signing Officer or Director Date