2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 26, 2006 8:00 am DOCUMENT # P04000034041 **Secretary of State** 01-26-2006 90041 029 ***150.00 EMTHHOMES, INC Principal Place of Business Mailing Address 27657 OLD US 41 ROAD 27657 OLD US 41 ROAD BONITA SPRINGS, FL 34135 US US **BONITA SPRINGS, FL 34135** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01192006 Cha-P CR2E034 (11/05) City & State City & State Applied For 4. FEI Number 20-0746913 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARSLAND, WILLIAM W Street Address (P.O. Box Number is Not Acceptable) 27657 OLD US 41 ROAD **BONITA SPRINGS, FL 34135** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. **\$IGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11 TITLE D TITLE ☐ Change ■ Addition Delete MARSLAND, WILLIAM W NAME NAME STREET ADDRESS PO BOX 2507 STREET ADDRESS BONITA SPRINGS, FL 34133 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TIT! F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

FILED



Florida Profit

EMTHHOMES, INC

PRINCIPAL ADDRESS 27657 OLD US 41 ROAD BONITA SPRINGS FL 34135 US

MAILING ADDRESS 27657 OLD US 41 ROAD BONITA SPRINGS FL 34135 US

P0400034041

FEI Number 200746913

Date Filed 02/20/2004

State FL Status ACTIVE Effective Date 02/19/2004

Registered Agent

Name & Address

MARSLAND, WILLIAM W 27657 OLD US 41 ROAD BONITA SPRINGS FL 34135

Officer/Director Detail

Name & Address	Title
MARSLAND, WILLIAM W PO BOX 2507	D
BONITA SPRINGS FL 34133 US	

Annual Reports

Report Year	Filed Date	
2005	07/18/2005	