

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037582

FILED
Apr 05, 2005
Secretary of State

Entity Name: SCHOTT HOMES, INC.

Current Principal Place of Business:

1264 MARKET CIRCLE UNIT 2
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

1264 MARKET CIRCLE UNIT 2
PORT CHARLOTTE, FL 33953

New Mailing Address:

PO BOX 2114
ENGLEWOOD, FL 34295

FEI Number: 56-2445272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHOTT, DWAIN
1264 MARKET CIRCLE UNIT 2
PORT CHARLOTTE, FL 33953 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: D () Delete
Name: SCHOTT, AUBREY D
Address: 2030 EAST 2200 NORTH
City-St-Zip: LAYTON, UT 84040

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHOTT, AUBREY D
Address: 9423 ACCO AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: VP () Change (X) Addition
Name: SCHOTT, SUSAN G
Address: 9423 ACCO AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: S () Change (X) Addition
Name: SCHOTT, KEVIN M
Address: 9423 ACCO AVE
City-St-Zip: ENGLEWOOD, FL 34224

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: AUBREY D SCHOTT

P

04/05/2005

Electronic Signature of Signing Officer or Director

_____ Date