

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037582

Entity Name: SCHOTT HOMES, INC.

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

1264 MARKET CIRCLE UNIT 2
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

PO BOX 2114
ENGLEWOOD, FL 34295

New Mailing Address:

FEI Number: 56-2445272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SCHOTT, SUSAN G
Address: 9423 ACCO AVE #A
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 Chapter 119, 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

PRES

04/11/2006

Electronic Signature of Signing Officer or Director

_____ Date