

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000045395

FILED
May 24, 2005
Secretary of State

Entity Name: FLORIDA HOME AND INVESTMENT CORPORATION

Current Principal Place of Business:

6110 SR 207, LOT B
ELKTON, FL 32033

New Principal Place of Business:

6110 SR 207, LOT A
ELKTON, FL 32033

Current Mailing Address:

6110 SR 207, LOT B
ELKTON, FL 32033

New Mailing Address:

6110 SR 207, LOT A
ELKTON, FL 32033

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, JOHN
6110 SR 207, LOT B
ELKTON, FL 32033 US

Name and Address of New Registered Agent:

SANDERS, WILLIAM M
6110 SR 207, LOT A
ELKTON, FL 32033 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 M. SANDERS

05/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDERSON, JOHN
Address: 6110 SR 207, LOT B
City-St-Zip: ELKTON, FL 32033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANDERS, WILLIAM M
Address: 6110 SR 207, LOT A
City-St-Zip: ELKTON, FL 32033

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 M. SANDERS

P

05/24/2005

Electronic Signature of Signing Officer or Director

Date