2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT THE STATE OF DOCUMENT # P04000049853

Mar 21, 2005 8:00 am Secretary of State

1. Entify Name DELAND	HOUSING DEVELOPERS,				03-21-2005 9	900/3 01/ ***	*150.00	
Principal Place		Mailing Address		·	а			
300 SUNFLOY DELAND, FL		300 SUNFLOWER CIRCLI DELAND, FL 32724	:	1 (44Daw)	r 4441 4181 4811 8811 8811			
2. Principal Pl	lace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062005	01062005 Chg-P CR2E034 (10/03)			
City & State	9	. City & State		4. FEI Numb	oer	Σ	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired	□ \$8.75 Fee Re	Additional quired	
	5. Name and Address of Current	Registered Agent		7. Name an	d Address of New Re	gistered Agent		
			Name	-				
SAXON, BERNICE S ESQ 201 E KENNEDY BLVD SUITE 600 TAMPA, FL 33602			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
	2 33002							
			City			FL Zip	Code	
	named entity submits this statement fions of registered agent.	or the purpose of changing its r	egistered office or	registered agent, or be	oth, in the State of Flor	rida. I am familiar	with, and accept	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered Agent signatu	re required when reinstating)		DATE		
	·····							
FILE	E NOW!!! FEE IS \$150.00	9. Election Campaig		\$5.00 May Be				
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	1		\$5.00 May Be Added to Fees				
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550. OFFICERS AND	.00 Trust Fund Contr		Added to Fees	/CHANGES TO OFFIC	CERS AND DIREC	TORS IN 11	
After Ma	OFFICERS AND	.00 Trust Fund Contr	11.	Added to Fees	/CHANGES TO OFFIC	CERS AND DIREC		
After Ma	OFFICERS AND RHODES, H. VANN	.00 Trust Fund Contri DDIRECTORS	11. IIILE NAME	Added to Fees	/CHANGES TO OFFIC			
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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 changed, or on an attachment with an address, with all other like empowered.

3/16/05 386-734-2564 Date Daytime Phone #