2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000074894

FILED Apr 29, 2005 Secretary of State

Entity Nar	ne: DE MOR	GAN COMMUNITIES, INC.						
Current Principal Place of Business:				New Principal Place of Business:				
11503 SAVANNAH LAKES DRIVE PARRISH, FL 34219				905 25TH DRIVE EAST ELLENTON, FL 34222				
Current Mailing Address:				New Mailing Address:				
11503 SAVANNAH LAKES DRIVE PARRISH, FL 34219				905 25TH DRIVE EAST ELLENTON, FL 34222				
FEI Number:	41-2136536	FEI Number Applied For()	FEI Nur	nber Not Appl	icable ()	Certific	ate of Status Des	sired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
BARWICK, ALLA 11503 SAVANNAH LAKES DRIVE PARRISH, FL 34219 US				BARWICK, ALLA 905 25TH DRIVE EAST ELLENTON, FL 34222 US				
	named entity e of Florida.	submits this statement for th	e purpose o	of changing i	ts registere	d office or	registered age	nt, or both,
SIGNATURE: ALLA BARWICK				04/29/2005				
	Electro	nic Signature of Registered A	Agent				Date	
Election Can	npaign Financir	g Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	BARWICK, AL	NAH LAKES DRIVE		Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	V BEDFORD, 905 25TH D ELLENTON	RICHARD RIVE EAST	(X) Addition	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	VS BARWICK, 905 25TH D ELLENTON	DERRICK RIVE EAST	(X) Addition	

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: ALLA BARWICK 04/29/2005 D