2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000078345

Entity Name: C.J.D. HOMES, INC.

Address: City-St-Zip:

BARNEGAT, NJ 08005

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 725 COMMERCE CENTER DR STE F SEBASTIAN, FL 32958 **New Mailing Address: Current Mailing Address:** 725 COMMERCE CENTER DR STE F SEBASTIAN, FL 32958 FEI Number: 02-0723135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAUFMAN, DAVID TURSKI, ROBERT C 1550 CROWBERRY LANE 1550 CROWBERRY LANE SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 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: ROBERT C. TURSKI 05/03/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: D/P () Delete Title: () Change () Addition DUNHAM, RANDALL C Name: Name: 1012 GOWDY AVE Address: Address: City-St-Zip: POINT PLEASANT BEACH, NJ 08742 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition TURSKI, ROBERT C Name: KAUFMANN, DAVID Name: 1550 CROWBERRY LANE 1550 CROWBERRY LANE Address: Address: SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition GODIN, MICHEL J Name: Name: 2716 46 AVE NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33714 City-St-Zip: Title: () Delete Title: () Change () Addition VARGE, LAURIE A Name: Name: Address: 1012 GOWDY AVE Address: City-St-Zip: POINT PLEASANT BEACH, NJ 08742 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DUNHAM, ERIN Name: 1119 EMERALD DRIVE Address:

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.

City-St-Zip:

SIGNATURE: ROBERT C. TURSKI VP 05/03/2005