

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086933

FILED
Apr 05, 2005
Secretary of State

Entity Name: ULTIMATE QUALITY HOMES INC

Current Principal Place of Business:

5048 LARCH LANE
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

7702 ROHUNA DR.
NEW PORT RICHEY, FL 34653 US

Current Mailing Address:

5048 LARCH LANE
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

7702 ROHUNA DR.
NEW PORT RICHEY, FL 34653 US

FEI Number: 20-1206632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERKEURST, BRIAN R
5048 LARCH LANE
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

TERKEURST, BRIAN R
7702 ROHUNA DR.
NEW PORT RICHEY, FL 34653 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:

04/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TERKEURST, BRIAN R
Address: 5048 LARCH LANE
City-St-Zip: NEW PORT RICHEY, FL 34653 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TERKEURST, BRIAN R
Address: 7702 ROHUNA DR.
City-St-Zip: NEW PORT RICHEY, FL 34653 US

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: BRIAN TERKEURST

P

04/05/2005

Electronic Signature of Signing Officer or Director

Date