

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164764

FILED
Sep 03, 2005
Secretary of State

Entity Name: OPEN HOUSE, ALL PEOPLES HOMES SMART HOUSING, INC.

Current Principal Place of Business:

5740 ROCK ISLAND RD.
#297
TAMARAC, FL 33319

New Principal Place of Business:

Current Mailing Address:

5740 ROCK ISLAND RD.
#297
TAMARAC, FL 33319

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GACHELIN, LOUIS
5740 ROCK ISLAND RD.
#297
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: GACHELIN, LOUIS
Address: 5740 ROCK ISLAND RD. #297
City-St-Zip: TAMARAC, FL 33319

Title: PT () Delete
Name: GACHELIN, LOUIS
Address: 5740 ROCK ISLAND RD. #297
City-St-Zip: TAMARAC, FL 33319

Title: SV () Delete
Name: EXANTUS, MARGARET
Address: 5740 ROCK ISLAND RD. #297
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LOUIS GACHELIN

Electronic Signature of Signing Officer or Director

CHRM

09/03/2005

Date