2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011488

Entity Name: ZENODRO HOMES AT THE RETREAT, INC.

FILED Jan 31, 2007 Secretary of State

Littly Nai	Me. ZENODR	O HOWES AT THE RETREA	II, IINC.				
Current Principal Place of Business:				New Principal Place of Business:			
600 SOUTH NORTHLAKE BLVD., #200 ALTAMONTE SPRINGS, FL 32701				600 SOUTH NORTHLAKE BLVD SUITE 200 ALTAMONTE SPRINGS, FL 32701			
Current Mailing Address:				New Mailing Address:			
600 SOUTH NORTHLAKE BLVD., #200 ALTAMONTE SPRINGS, FL 32701				600 SOUTH NORTHLAKE BLVD SUITE 200 ALTAMONTE SPRINGS, FL 32701			
FEI Number:	: 20-2411650	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ORDONEZ, LUSANT 1580 TRAVERTINE TERRRACE SANFORD, FL 32746 US				ORDONEZ, LUSANT 1580 TRAVERTINE TERRRACE SANFORD, FL 32771 US			
	named entity see of Florida.	submits this statement for the	purpose c	of changing i	ts registere	ed office or registered agent, or both,	
SIGNATURE: LUSANT ORDONEZ				01/31/2007			
	Electror	ic Signature of Registered Ag	gent			Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () ORDONEZ, LU 1580 TRAVERT SANFORD, FL	INE TERRACE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	()	Delete		Title: Name: Address: City-St-Zip:	1580 TRA\	() Change (X) Addition , MARIHER C FERTINE TERRACE	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LUSANT ORDONEZ P 01/31/2007