2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000040014

City-St-Zip:

Entity Name: HOMES BY FRIENDS, INC.

FILED Mar 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11140 SAILBROOKE DR RIVERVIEW, FL 33569 **Current Mailing Address: New Mailing Address:** 11140 SAILBROOKE DR RIVERVIEW, FL 33569 FEI Number: 20-2434312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SELL, CAROLE 11140 SAILBROOKE DR RIVERVIEW, FL 33569 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SELL, CAROLE SELL, CAROLE Name: Name: 11140 SAILBROOKE DR 11140 SAILBROOKE DR Address: Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33569 US Title: () Delete Title: VΡ () Change (X) Addition SELL, LEO F Name: Name: 11140 SAILBROOKE DRIVE Address: Address: RIVERVIEW, FL 33569 US City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete SECR SELL, CAROLE Name: Name: 11140 SAII BROOKE DRIVE Address Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US Title: () Delete Title: **TREA** () Change (X) Addition SELL, CAROLE Name: Name: Address: Address: 11140 SAILBROOKE DRIVE

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.

City-St-Zip:

RIVERVIEW, FL 33569 US

Ρ SIGNATURE: CAROLE SELL 03/08/2006