2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060421

Entity Name: JMP CUSTOM HOMES INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1931 BROOKSHIRE CIRCLE 3172 SKYWAY CIRCLE

W. MELBOURNE, FL 32904 UNIT 5

MELBOURNE, FL 32934

Current Mailing Address: New Mailing Address:

1931 BROOKSHIRE CIRCLE 3172 SKYWAY CIRCLE W. MELBOURNE, FL 32904

UNIT 5

MELBOURNE, FL 32934

FEI Number: 47-0954752 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:

PEARCE, BRUCE T PEARCE, BRUCE T 1931 BRÓOKSHIRE CIRCLE 3172 SKÝWAY CIRCLE

US W. MELBOURNE, FL 32904 UNIT 5

MELBOURNE, FL 32934 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: BRUCE T PEARCE 04/26/2006

> 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 PEARCE, BRUCE T PEARCE, WESLEY H Name: Name: 1931 BROOKSHIRE CIRCLE 4417 FOUR LAKES DRIVE Address: Address:

MELBOURNE, FL 32940 City-St-Zip: W. MELBOURNE, FL 32904 City-St-Zip:

Title: PD (X) Change () Addition Title: () Delete Name: PEARCE, JEANNE M Name: PEARCE, JEANNE M

1931 BROOKSHIRE CIRCLE 1931 BROOKSHIRE CIRCLE Address: Address: W. MELBOURNE, FL 32904 W. MELBOURNE, FL 32904 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

PEARCE, JENNIFER M PEARCE, JENNIFER M Name: Name: 1931 BROOKSHIRE CIRCLE 1931 BROOKSHIRE CIRCLE Address: Address: W. MELBOURNE, FL 32904 City-St-Zip: W. MELBOURNE, FL 32904 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

PEARCE, JOHN H Name: Name: Address: Address: 4417 FOUR LAKES DRIVE City-St-Zip: City-St-Zip: MELBOURNE, FL 32940

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: JEANNE M PEARCE PD 04/26/2006