

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073074

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: B HOME PROPERTY MANAGEMENT, INC.

## Current Principal Place of Business:

3281 NW 118TH DRIVE  
CORAL SPRINGS, FL 33065

## New Principal Place of Business:

296 NE SURFSIDE AVE  
PORT SAINT LUCIE, FL 34983

## Current Mailing Address:

3281 NW 118TH DRIVE  
CORAL SPRINGS, FL 33065

## New Mailing Address:

296 NE SURFSIDE AVE  
PORT SAINT LUCIE, FL 34983

FEI Number: 20-4940016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERNANDEZ, VERA M  
3281 NW 118TH DRIVE  
CORAL SPRINGS, FL 33065 US

## Name and Address of New Registered Agent:

FERNANDEZ, VERA M  
296 NE SURFSIDE AVE  
PORT SAINT LUCIE, FL 34983 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: \_\_\_\_\_

02/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERNANDEZ, VERA M  
Address: 3281 NW 118TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, VERA M  
Address: 296 NE SURFSIDE AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP ( ) Change (X) Addition  
Name: ANTUNES, FERNANDA C  
Address: 296 NE SURFSIDE AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify 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: VERA FERNANDEZ

PRES

02/03/2009

Electronic Signature of Signing Officer or Director

Date