2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2005 8:00 am Secretary of State 04-26-2005 90168 001 ***150.00 DOCUMENT # P11110 ADVANCE HOMES INC. **ZUU4033U** Principal Place of Business Mailing Address 4215 E. 60TH STREET **4215 E. 60TH STREET** SUITE 6 SUITE 6 DAVENPORT, IA 52807 DAVENPORT, IA 52807 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032005 Cha-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 42-0794211 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KERVER, W. MICHAEL Street Address (P.O. Box Number is Not Acceptable) 11220 METRO PARKWAY, SUITE 27 FORT MYERS, FL 33912 City Zip Code FL 8. 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. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P Addition TITLE Delete TITLE ☐ Change NAME SEITZ, A. JEFFREY NAME STREET ADDRESS 1705 SUSAN CT. STREET ADDRESS CITY-ST-ZIP BETTENDORF, IA 52722 CITY-ST-ZIP Change TITLE ☐ Delete HILE ☐ Addition WETZEL, BRUCE 2135 NICholas Ct Bittendorf Ja 52722 NAME NAME STREET ADDRESS 1705 SUSAN CT. STREET ADDRESS CITY-ST-ZIP BETTENDORF, IA 52722 CITY-ST-ZIP TITLE Delete TITLE 2 Change Addition SEITZ, A. JEFFREY NAME NAME 1705 Susan Ct STREET ADDRESS 10614 RESTORATION TERR. STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34212 CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition SEITZ, VELMA L. NAME NAME STREET ADDRESS **4221 E. 60TH STREET** STREET ADORESS DAVENPORT, IA 52807 CITY-ST-ZIF CITY-\$1-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE - Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

OF SIGNING OFFICER OR DIRECTOR

1-3-05

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changed, or on an attach

SIGNATURE:

FILED