2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # P93000043333 1. Entity Name REGAL PARK HOMES, INC.							 A	04-28-20	-	5 033 ***1	50.00	
Principal Place 9617 SPRING CLERMONT, F	LAKE DRIV	/E	Mailing Address 9617 SPRING LAKE D CLERMONT, FL 3471					. 				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address One Yorkdale Road			K						
Suite, Apt. #, etc.			Suite Agr. #, etc.				04112008	Chg-P	CR2E0	34 (12/06)		
City & State			Toronto. Ontario				4. FEI Numbe 59-319				lied For Applicable	
Zip	Country		MGA 3A1 Car		"aclo	5. Certificate o		of Status Desired	d S8.75 Additional Fee Required			
		7. Name and Address of New Registered Agent Name										
PRATT, JAMES R ESQ. GRAHAM,BUILDER,JONES, PRATT & MARKS						Street Address (P.O. Box Number is Not Acceptable)						
369 NORTH NEW YORK AVENUE, 3RD FLOOR WINTER PARK, FL 32789												
						ty FL Zip Code						
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 the obligations of registered agent.												
SIGNATURE												
Signature, type or printed and to disjust to began and the dissertance of the signature of												
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees												
10.		OFFICERS AND		11.			ADDITIONS/	CHANGES TO OF	FICERS AND	. /		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONE YOR	AWRENCE RKDALE RD, STE 510 O, ON m6a3a1	☐ Delete				Yorko anto, C	iale Ro N Car	od, s ada	Achange UITE (I MOA	Addition 501 3A1	
TITLE	VSD		☐ Delete	TITL				. , 1		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	SILVER, SHOEL ONE YORKDALE RD, STE 510 TORONTO, ON m6a3a1				ME EET ADDRESS Y-ST-ZIP	One	y Yorko	vale R	oad, an <i>ad</i> l	Sutte I Mbt	601 43A1	
TITLE	·D		☐ Detete	TITL						Сһапде	Addition	
NAME STREET ADDRESS	i e	R, BERNARD RKDALE RD, STE 510			EET ADDRESS	One	2 Yorki	dale Ri ON Ca	oada	Suite	201	
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NAME.	T FISHER,	MATTHEW K	☐ Delete	TITL		$\Delta \sigma c$	Vacka	lale Roc	ad co	140 (001	
STREET ADDRESS		RKDALE RD, STE 510 O, ON m6a3a1			EET ADDRESS Y-ST-ZIP	Tor	c 10 c c	on car	nada	MOA	3A1	
DILE	AS		☐ Delete	TITL						Change	Addition	
NAME . STREET ADDRESS	MONDEL ONE YOU	LL, PAUL RKDALE RD., STE 510		NAN STR	ME Let address	One	e Yorko	dale Ro	xod, z	surte	601	
CITY-ST-ZIP	TORONT	O, ON M6A-3A1		CITY	Y-ST-ZIP	Ta	ranto,	<u>on, ca</u>	nada	MGH	3/11	
IIILE NAME			☐ Delete	TITL NAA				-		Change	Addition	
STREET ADDRESS				STR	EET ADDRESS Y-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address with all other like empowered.												
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OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR