2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000034336

Address:

City-St-Zip:

6522 GUNN HWY

TAMPA, FL 33625

FILED May 21, 2004 Secretary of State

Entity Name: JACK SUAREZ HOMES, INC. **Current Principal Place of Business: New Principal Place of Business:** 6522 GUNN HWY TAMPA, FL 33625 **Current Mailing Address: New Mailing Address:** 6522 GUNN HWY TAMPA, FL 33625 FEI Number: 59-3312673 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: LYNCH, PAUL R 101 EAST KENNEDY BLVD., SUITE 2800 TAMPA, FL 33602 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: () Change () Addition SUAREZ, JACK D Name: Name: 6522 GUNN HWY Address: Address: TAMPA, FL 33625 City-St-Zip: City-St-Zip: Title: Title: () Change () Addition (X) Delete Name: ROGLER, ANDREW L Name: 6522 GUNN HWY Address: Address: TAMPA, FL 33625 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete LYRCH, PAUL R Name: LYNCH, PAUL R Name: 101 E KENNEDY BLVD STE 2800 101 E KENNEDY BLVD STE 2800 Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602 Title: () Delete Title: () Change () Addition CUNNINGHAM, DELTON Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: DELTON N CUNNNINGHAM VP 05/21/2004