


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 08:00 AM
Secretary of State

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| DOCUMENT # P95000057627 |  |
| 1. Entity Name PRIDE HOMES, INC. | |

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|---|---|
| Principal Place of Business 5103 CARTER SPENCER ROAD MIDDLEBURG, FL 32068 | Mailing Address 5103 CARTER SPENCER ROAD MIDDLEBURG, FL 32068 |
|---|---|

DO NOT WRITE IN THIS SPACE



01072005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-3327569 | Applied For <input checked="" type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired JP | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**PRIDEMORE, JOANN
5103 CARTER SPENCER ROAD
MIDDLEBURG, FL 32068**

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IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when re-instating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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10. OFFICERS AND DIRECTORS

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|---|--|
| TITLE PD | NAME PRIDEMORE, JOANN |
| STREET ADDRESS 5103 CARTER SPENCER ROAD | CITY-ST-ZIP MIDDLEBURG, FL 32068 |
| TITLE T | NAME PRIDEMORE, ROGER |
| STREET ADDRESS 5103 CARTER SPENCER ROAD | CITY-ST-ZIP MIDDLEBURG, FL 32068 |
| TITLE S | NAME LOFTUS, RICHARD D |
| STREET ADDRESS 5105 CARTER SPENCER RD | CITY-ST-ZIP MIDDLEBURG, FL 32068 |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |
| TITLE | NAME |
| STREET ADDRESS | CITY-ST-ZIP |

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01/26/05-80027-005.150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *Joann Pridemore* 1/10/05 904 291-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #