

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P95000093846	
1. Entity Name IH BRANDON HOMES, INC.	



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 SEP -7 AM 11:40

Principal Place of Business 9950 PRINCESS PALM AVENUE SUITE 340 TAMPA, FL 33619 US	Mailing Address 9950 PRINCESS PALM AVENUE SUITE 340 TAMPA, FL 33619
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2. Principal Place of Business 711 S. Howard Avenue	3. Mailing Address 711 S. Howard Avenue
Suite, Apt. #, etc. Suite 200	Suite, Apt. #, etc. Suite 200
City & State Tampa, FL	City & State Tampa, FL
Zip 33606	Country

08272005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3372656	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent LYNCH, PAUL R 101 EAST KENNEDY BLVD., SUITE 2800 TAMPA, FL 33602	7. Name and Address of New Registered Agent Name Henderson, Allen E. Street Address (P.O. Box Number is Not Acceptable) 711 S. Howard Avenue Suite 200 City Tampa, FL Zip Code 33606
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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: *Allen E. Henderson* **ALLEN E. HENDERSON** **9/1/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HEDNERSON, ALLEN E 711 S. HOWARD AVENUE, SUITE 200 TAMPA, FL 33606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/S/D Henderson, Allen E. 711 S. Howard Avenue, Ste. 200 Tampa, FL 33606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD HENDERSON, FRANK M JR. 711 S. HOWARD AVENUE, SUITE 200 TAMPA, FL 33606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Adkins, William M., Jr. 9950 Princess Palm Avenue, Ste. 340 Tampa, FL 33619 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HENDERSON, FRANK M JR. 711 S. HOWARD AVENUE, SUITE 200 TAMPA, FL 33606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400059613924 09/14/05--01033--020 ***\$1.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Allen E. Henderson* **ALLEN E. HENDERSON** **9/1/05** **813-245-1489**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Allen E. Henderson, Chairman