2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 06, 2005
Secretary of State

DOCUMENT# P95000098066

Entity Name: HORIZON HOMES OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

197 MONTGOMERY RD
STE 120
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

197 MONTGOMERY RD
STE 120
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 59-3353264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WASSERMAN, GREGG
2128 BLUE IRIS PL
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

WASSERMAN, GREGG
197 MONTGOMERY RD
100
ALTAMONTE SPRINGS, FL 32714 US

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: _____ 07/06/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: WASSERMAN, GREGG A
Address: 2128 BLUE IRIS PL
City-St-Zip: LONGWOOD, FL 32779

Title: VP ( ) Delete
Name: SCHULTE, DAVID J
Address: 197 MONTGOMERY RD #120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Delete
Name: BROWN, RICHARD
Address: 197 MONTGOMERY RD #120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S,D ( ) Delete
Name: WASSERMAN, LENA K
Address: 197 MONTGOMERY RD #120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Delete
Name: WASSERMAN, LENA K
Address: 197 MONTGOMERY RD #120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Delete
Name: TEICHER, MITCHELL
Address: 197 MONTGOMERY RD #120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: GREGG A WASSERMAN P 07/06/2005
Electronic Signature of Signing Officer or Director — Date