

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000081609

FILED
Sep 19, 2005
Secretary of State

Entity Name: KENDAR HOMES CORPORATION

Current Principal Place of Business:

441 CORTEZ RD W.
BRADENTON, FL 34207 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4002
SARASOTA, FL 34230 US

New Mailing Address:

FEI Number: 65-0697292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, ROBERT F
1301 SIXTH AVENUE W
SUITE 400
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REHA, DARRELL L
Address: 359 MACARTHUR AVENUE
City-St-Zip: SARASOTA, FL 34243

Title: S () Delete
Name: CURLESS, JERRY V
Address: PO BOX 4002
City-St-Zip: SARASOTA, FL 34230

Title: V () Delete
Name: LEVITT, DAVID M
Address: PO BOX 4002
City-St-Zip: SARASOTA, FL 34230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: CURLESS, JERRY V
Address: PO BOX 4002
City-St-Zip: SARASOTA, FL 34230

Title: S (X) Change () Addition
Name: HENRY, LISA J
Address: PO BOX 4002
City-St-Zip: SARASOTA, FL 34230

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: DARRELL REHA

P

09/19/2005

Electronic Signature of Signing Officer or Director

Date