

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000087582

Entity Name: GOLD MEDALLION HOMES, INC.

FILED
Mar 17, 2005
Secretary of State

Current Principal Place of Business:

19909 US HWY 41 N
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

19909 US HWY 41 N
LUTZ, FL 33549 US

New Mailing Address:

FEI Number: 59-3408464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, ROBERT A JR
19909 US 41
LUTZ, FL 33549 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KELLY, ELIZABETH J
Address: 4152 ALADAR CT.
City-St-Zip: LAND O'LAKES, FL 34639

Title: D () Delete
Name: KELLY, ROBERT A JR
Address: 4152 ALADAR CT.
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KELLY, ELIZABETH J
Address: 301 LAKE KELL CT.
City-St-Zip: LUTZ, FL 33549

Title: D (X) Change () Addition
Name: KELLY, ROBERT A JR
Address: 301 LAKE KELL CT.
City-St-Zip: LUTZ, FL 33549

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: ROBERT A. KELLY

PRES

03/17/2005

Electronic Signature of Signing Officer or Director

Date