2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006327

Entity Name: S.F. PROPERTIES, INC.

FILED Jan 31, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1460 56TH SQUARE WEST VERO BEACH, FL 329662396

Current Mailing Address: New Mailing Address:

1460 56TH SQUARE WEST VERO BEACH, FL 329662396

FEI Number: 59-3442370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HENDERSON, STEVE
979 BEACHLAND BLVD.
VERO BEACH, FL 32963 US
HENDERSON, STEVE
756 BEACHLAND BLVD.
VERO BEACH, FL 32963 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: STEVE L. HENDERSON 01/31/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: SCHOMMER, ALAN R Name:

Address: 1460 56TH SQUARE WEST Address: City-St-Zip: VERO BEACH, FL 329662396 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: SCHOMMER, VICTORIA M Name: SCHOMMER, VICTORIA M 1460 56TH SQUARE WEST 1460 56TH SQUARE WEST Address: Address: VERO BEACH, FL 329662396 VERO BEACH, FL 329662396 City-St-Zip: City-St-Zip:

Title: D () Delete Title: VP (X) Change () Addition Name: SCHOMMER, MATTHEW Name: SCHOMMER, MATTHEW Address: 1460 56TH SQUARE WEST Address: 1460 56TH SQUARE WEST

City-St-Zip: VERO BEACH, FL 329662396

Title: D () Delete Title: T (X) Change () Addition Name: SCHOMMER, AMANDA

Name: SCHOMMER, AMANDA

 Name
 Scholinier, Alvanda

 Address:
 1460 56TH SQUARE WEST
 Address:
 1460 56TH SQUARE WEST

 City-St-Zip:
 VERO BEACH, FL 329662396
 City-St-Zip:
 VERO BEACH, FL 329662396

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: ALAN R. SCHOMMER P 01/31/2005