

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90417 037 ***150.00

DOCUMENT # P97000020837

1. Entity Name
COMMUNITIES HOME BUILDERS, INC.



Principal Place of Business
**24301 WALDEN CENTER DR
STE 300
BONITA SPRINGS, FL 34134 US**

Mailing Address
**24301 WALDEN CENTER DR
STE 300
BONITA SPRINGS, FL 34134 US**

40079714



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04202006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
59-3431554

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HASTINGS, VIVIEN N
24301 WALDEN CENTER DR
STE 300
BONITA SPRINGS, FL 34134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME OAK, TIMOTHY
STREET ADDRESS 24301 WALDEN CENTER DR, STE 300
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE DVT ☐ Delete
NAME ADELMAN, STEVEN C
STREET ADDRESS 24301 WALDEN CENTER DR, STE 300
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE D ☒ Delete
NAME GREENBERG, MICHAEL
STREET ADDRESS 24301 WALDEN CENTER DR, STE 300
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE V ☐ Delete
NAME DIETZ, JAMES P
STREET ADDRESS 24301 WALDEN CENTER DR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE VS ☐ Delete
NAME HASTINGS, VIVIEN N
STREET ADDRESS 24301 WALDEN CENTER DR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE VAS ☐ Delete
NAME CULLEN, JAMES D
STREET ADDRESS 24301 WALDEN CENTER DR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

V ☒ Change ☐ Addition
NAME Steven C. Adelman
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL 34134

V/T ☐ Change ☒ Addition
NAME Ernest J. Scheidemann
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL 34134

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Vivien Hastings 4/21/06

239-498-8213