2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SWINING OFFICER ON DIRECTOR

Mar 24, 2005 08:00 AM **DOCUMENT # P97000104100 Secretary of State** 1. Entity Name SOUTHERN DESIGN HOME BUILDERS, INC. Principal Place of Business Mailing Address %170 W. DEARBORN ST. %170 W. DEARBORN ST. ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 No Chg-P CR2E034 (10/03) 01042005 DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0798687 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DUNKIN, DAVID A 170 WEST DEARBORN ST. ENGLEWOOD, FL 34223-3290 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or polit, in the State of Forida. I am fam' ar with, and accept the obligations of registered agent. SIGNATURE. Signalure, typedic printed hamelet registered age transfiltre flapp capit, (Interior of other upon purpose of age in age. Borden of the participation) 2AH \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DEST TITLE SEARS, MICHELLE KAME STREET ADDRESS 7075 PALCIDA ROAD #103 M000002750**7**6 CATY ST ZIP ENGLEWOOD, FL 34224 03/24/05-80036-024 150.nd TITLE MAME STREET ADDRESS CITY ST ZIP TITLE STREET ADDRESS DO NOT WRITE CITY ST ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST ZIP TITLE LAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as it 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.

FILED