## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000024457

Entity Name: WATERLINE HOMES, INC.

FILED Apr 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1025 SOUTH UNIVERSITY DRIVE 901 COCO PLUM WAY OFFICE MAX PLAZA PLANTATION, FL 33324 PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

1025 SOUTH UNIVERSITY DRIVE 901 COCO PLUM WAY OFFICE MAX PLAZA OF PLANTATION, FL 33324 PLANTATION, FL 33324

FEI Number: 65-0912147 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:

FRIEDMAN, ESQ., SUZANNE 1025 S. UNIVERSITY DRIVE OFFICE MAX PLAZA PLANTATION, FL 33324 US FRIEDMAN, ESQ., SUZANNE 901 COCO PLUM WAY PLANTATION, FL 33324 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: SUZANNE FRIEDMAN 04/16/2005

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: P (X) Change () Addition

 Name:
 KIRTMAN, JAY
 Name:
 KIRTMAN, JAY

 Address:
 1025 S. UNIVERSITY DR.
 Address:
 901 COCO PLUM WAY

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 PLANTATION, FL 33324

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: FRIEDMAN, SUZANNE FRIEDMAN, SUZANNE

Name:FRIEDMAN, SUZANNEName:FRIEDMAN, SUZANNEAddress:1025 S. UNIVERSITY DRIVEAddress:901 COCO PLUM WAYCity-St-Zip:PLANTATION, FL 33324City-St-Zip:PLANTATION, FL 33324

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 AARON, STEVEN
 Name:
 AARON, STEVEN

 Address:
 1025 S. UNIVERSITY DR.
 Address:
 901 COCO PLUM WAY

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 PLANTATION, FL 33324

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: SUZANNE FRIEDMAN VP 04/16/2005