2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024593

Entity Name: DIVOSTA HOMES MARKETING, INC.

FILED Mar 27, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	BOULEVARD CH GARDEN)#400 IS, FL 33418			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4500 PGA BOULEVARD #400 PALM BEACH GARDENS, FL 33418					
FEI Number:	65-0906018	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:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US					
The above in the State		submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Ager	nt	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: AD			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KOON, DAVID 4500 PGA BOU) Delete A JLEVARD #400 GARDENS, FL 33418	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STOLLER, JOI 100 BLOOMFI) Delete HN R ELD HILLS PKWY #300 HILLS, MI 48304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PROUT, FRED 4500 PGA BOU) Delete ERICK R JLEVARD #400 GARDENS, FL 33418	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SMITH, HARM 4500 PGA BLV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLYM, JAN M 100 BLOOMFI) Delete ELD HILLS PKWY #300 HILLS, MI 48304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ROBINSON, B 100 BLOOMFI) Delete RUCE E ELD HILLS PKWY #300 HILLS, MI 48304	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JAN M KLYM AS 03/27/2005