2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051263

Entity Name: LH CUSTOM HOMES, INC.

FILED Apr 14, 2005 Secretary of State

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

390 BUSINESS PRKWY 556 SE PORT ST. LUCIE BLVD. #1P PORT ST. LUCIE, FL 34984

ROYAL PALM BEACH, FL 33411

ROYAL PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

1128 ROYAL PALM BEACH BVD 556 SE PORT ST. LUCIE BLVD. #205 PORT ST. LUCIE, FL 34984

FEI Number: 65-0928457 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:

MELTZER, PATSI L
1128 ROYAL PALM BCH BLVD
4205

MELTZER, PATSI L
5844 NW WINDY PINES LANE
PORT ST. LUCIE, FL 34986 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: PATSI L. MELTZER 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ROYAL PALM BEACH, FL 33411 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MELTZER, PATSI L
 Name:
 MELTZER, PATSI L

 Address:
 722 SUNNY PINE WAY #F2
 Address:
 5844 NW WINDY PINES LANE

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 PORT ST. LUICE, FL 34984

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

 Name:
 LARRICK, EARL R
 Name:

 Address:
 390 BUSINESS PRKWY
 Address:

 City-St-Zip:
 ROYAL PALM BEACH, FL 33411
 City-St-Zip:

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: PATSI L. MELTZER SP 04/14/2005