2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000052233

FILED Apr 19, 2005 Secretary of State

Entity Name: ACTIVE AMERICAN COMMUNITIES, INC.					
Current Principal Place of Business:			New Principal Place	of Business:	
	CENT EXECU Y, FL 32746	ITIVE CT, SUITE 120			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
615 CRES	CENT EXECU Y, FL 32746	ITIVE CT, SUITE 120			
FEI Number:	59-3582761	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
GRAY, N DWAYNE JR GREENSPOON, MARDER, HIRSCHFELD ET AL 135 W CENTRAL BLVD, SUITE 1100 ORLANDO, FL 32801 US			GREENSPOON, MAR 201 EAST PINE STRE	GRAY, N DWAYNE JR GREENSPOON, MARDER, HIRSCHFELD ET AL 201 EAST PINE STREET SUITE 500 ORLANDO, FL 32801 US	
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:				04/19/2005	
	Electror	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WOLF, JONAT	T EXECUTIVE CT, SUITE 120	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRAY, DWAYN	NTRAL BLVD., STE 1100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PDS ()) Delete CE	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: JONATHAN L WOLF VTD 04/19/2005

615 CRESCENT EXECUTIVE CT, STE 120

LAKE MARY, FL 32708

Address:

City-St-Zip: