2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96920

FILED May 26, 2004 Secretary of State

Entity Name: APARTMENT HUNTERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 11209 N. DALE MABRY, SUITE D TAMPA, FL 33618 **Current Mailing Address: New Mailing Address:** 11209 N. DALE MABRY, SUITE D TAMPA, FL 33618 FEI Number: 59-3094616 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: MECKLEY, M. SCOTT 11209 N. DALE MABRY, SUITE D TAMPA, FL 33618 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition OEHLERKING, STEVE Name: Name: 17301 EQUESTRIAN TRAIL Address: Address: City-St-Zip: ODESSA, FL 33556 City-St-Zip: Title: Title: () Delete CEOD (X) Change () Addition Name: OEHLERKING, BARBARA Name: MECKLEY, M. SCOTT 17301 EQUESTRIAN TRAIL 11209 N. DALE MABRY, SUITE D Address: Address: ODESSA, FL 33556 City-St-Zip: City-St-Zip: TAMPA, FL 33618 (X) Change () Addition Title: CFO () Delete Title: DAVIS, DAVID A HUNT, HAMILTON Name: Name: 2951 GOLDENVIEW LANE 2715 W. JETTON AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: TAMPA, FL 33629 Title: () Delete Title: () Change (X) Addition BAISDEN, LARRY Name: Name: Address: Address: 11209 N. DALE MABRY, SUITE D City-St-Zip: City-St-Zip: TAMPA, FL 33618 Title: Title: () Change (X) Addition () Delete HAMPTON, JOHN Name: Name: Address: Address: 11209 N. DALE MABRY, SUITE D City-St-Zip: City-St-Zip: TAMPA, FL 33618

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: M. SCOTT MECKLEY CEOD 05/26/2004