FILED
Jul 30, 2003 8:00 am
Secretary of State
07-30-2003 90070 047 ***550.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000098912

1. Entity Name
K & B Custom Home Builders, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4540 Goeble Rd.	P.O. Box 638
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fort Myers, FL	City & State: Lehigh Acres FL
Zip: 33905 Country: Lee	Zip: 33970 Country: Lee

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1088112 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Robert Bowers

Street Address (P.O. Box Number is Not Acceptable): 23 Colorado Rd

City: Lehigh Acres FL Zip Code: 33936

8. 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: Robert Bowers Robert Bowers 5.22.03
(Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D
NAME	Terry Vance
STREET ADDRESS	P.O. Box 638
CITY-ST-ZIP	Lehigh Acres FL 33970
TITLE	S
NAME	Karen Vance
STREET ADDRESS	P.O. Box 638
CITY-ST-ZIP	Lehigh Acres FL 33970
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NAME	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen C Vance, Secretary 5-30-03 239 694-5806
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #