


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2004 8:00 am
Secretary of State

01-13-2004 90011 010 ***158.75

DOCUMENT # P01000070695 1. Entity Name DEZIGN HOMES, INC.	
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Principal Place of Business 7281 HENDRY CREEK DRIVE FT MYERS, FL 33908	Mailing Address 7281 HENDRY CREEK DRIVE FT MYERS, FL 33908
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01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1127987	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WELLS, FRANCIS G JR 7281 HENDRY CREEK DRIVE FT MYERS, FL 33908
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Francis G Wells Francis G Wells 1/8/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WELLS, FRANCIS G JR 7281 HENDRY CREEK DRIVE FT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST WELLS, KATHLEEN A 7281 HENDRY CREEK DRIVE FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP METZGER, MICHAEL T 8380 BOONIES BOARD RD FT MYERS, FL 33917
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Francis G Wells Francis G Wells 1/8/04 239-432-0690
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #