

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000109376

Entity Name: ICON HOMES, INC.

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

17481 MARCY AVE.  
PORT CHARLOTTE, FL 33948

## New Principal Place of Business:

949 TAMIAMI TRAIL  
SUITE 204  
PORT CHARLOTTE, FL 33953

## Current Mailing Address:

17481 MARCY AVE.  
PORT CHARLOTTE, FL 33948

## New Mailing Address:

949 TAMIAMI TRAIL  
SUITE 204  
PORT CHARLOTTE, FL 33953

FEI Number: 65-0874560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COUTO, PAUL  
17481 MARCY AVE.  
PORT CHARLOTTE, FL 33948

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COUTO, PAUL  
Address: 17481 MARCY AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: V ( ) Delete  
Name: COUTO, JOSE  
Address: 17481 MARCY AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: S ( ) Delete  
Name: COUTO, ANTONIO  
Address: 1186 SANDY ST.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T ( ) Delete  
Name: COUTO, EDWIN  
Address: 19369 LAUZON AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D ( ) Delete  
Name: COUTO, JOHN  
Address: 223 VAL DIVA  
City-St-Zip: PUNTA GORDA, FL 33983

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PAUL COUTO

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date