

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001836

**Entity Name:** DOMAIN HOMES, INC.

**Current Principal Place of Business:**

5703 S MACDILL AVE  
TAMPA, FL 33611

**FILED**  
**Apr 24, 2015**  
**Secretary of State**  
**CC5079900039**

**Current Mailing Address:**

5703 S MACDILL AVE  
TAMPA, FL 33611 US

**FEI Number: 27-2352644**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROBLES, KEVIN  
2107 CHESTNUT FOREST DRIVE  
TAMPA, FL 33618 US

*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

**Officer/Director Detail :**

Title PD  
Name MCSWAIN, SHARON  
Address 170 JOHN ANDERSON DRIVE  
City-State-Zip: ORMOND BEACH FL 32176

Title VD  
Name MCSWAIN, DAN  
Address 7845 BETHEL ROAD  
City-State-Zip: GAINESVILLE GA 30506

Title STD  
Name MCSWAIN, ELAINE  
Address 7845 BETHEL ROAD  
City-State-Zip: GAINESVILLE GA 30506

Title AST  
Name ROBLES, KEVIN  
Address 2107 CHESTNUT FOREST DRIVE  
City-State-Zip: TAMPA FL 33618

*I hereby 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 all other like empowered.*

**SIGNATURE: SHARON MCSWAIN**

**PRESIDENT**

**04/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date