

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 426248

FILED
Apr 16, 2007
Secretary of State

Entity Name: CUSTOM HOME BUILDERS, INC.

Current Principal Place of Business:

1919 NIGHTFALL DR.
NEPTUNE BCH, FL 322661517 US

New Principal Place of Business:

Current Mailing Address:

1919 NIGHT FALL DR.
NEPTUNE BCH, FL 322661517 US

New Mailing Address:

FEI Number: 59-1462379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DARYL GRUBBS
1919 NIGHTFALL DR
NEPTUNE BCH, FL 32266 US

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: PD () Delete
Name: GRUBBS, DARYL,
Address: 1919 NIGHTFALL DR.
City-St-Zip: NEPTUNE BCH, FL

Title: VST () Delete
Name: KARIN A. KARNER,
Address: 1919 NIGHTFALL DR.
City-St-Zip: NEPTUNE BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VST (X) Change () Addition
Name: KARIN A. KOERNER,
Address: 1919 NIGHTFALL DR.
City-St-Zip: NEPTUNE BCH, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KARIN A KOERNER

VST

04/16/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date