

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 560935

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: BUILDERS SHOWCASE, INC.

## Current Principal Place of Business:

900 21ST STREET  
VERO BCH, FL 32960 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 6367  
P.O. BOX 6367  
VERO BCH, FL 32961 US

## New Mailing Address:

FEI Number: 59-1826114      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLOCK, SAMUEL A.  
3339 CARDINAL DRIVE  
SUITE 200  
VERO BEACH, FL 32963 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: BLOCK, CHARLES E.  
Address: 5195 ST. PHILIPS ISLAND LANE.  
City-St-Zip: VERO BEACH, FL 32967 US

Title: STD ( ) Delete  
Name: BLOCK, JUDITH,  
Address: 5195 ST. PHILIPS ISLAND LANE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: VPD ( ) Delete  
Name: JUDITH, BLOCK  
Address: 5195 ST. PHILIPS ISLAND LANE  
City-St-Zip: VERO BEACH, FL 32967 US

Title: D ( ) Delete  
Name: JENNIFER, BLOCK  
Address: 5195 ST. PHILIPS ISLAND LANE  
City-St-Zip: VERO BEACH, FL 32967

## 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:

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: JUDITH A. BLOCK

VPD

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date