

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90138 031 \*\*\*158.75

**DOCUMENT # 635221**

1. Entity Name

IDEA HOUSE, INC.



Principal Place of Business

12922 PROSPERITY FARMS RD  
PALM BEACH GARDENS 33410  
US

Mailing Address

12922 PROSPERITY FARMS RD  
PALM BEACH GARDENS FL 33410  
US

2. Principal Place of Business

15822 73<sup>rd</sup> TERR. N.  
Suite, Apt. #, etc.

3. Mailing Address

15822 73<sup>rd</sup> TERR. N.  
Suite, Apt. #, etc.

City & State

PALM BEACH GARDENS FL

City & State

PALM BEACH GARDENS, FL

Zip

33418

Country

U.S.A.

Zip

33418

Country

U.S.A.

4. FEI Number

59-1951979

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ADAMS, G. JAMES  
12922 PROSPERITY FARMS ROAD  
NORTH PALM BEACH FL 33410

DECEASED

7. Name and Address of New Registered Agent

Name

ADAMS, CAROL E.

Street Address (P.O. Box Number is Not Acceptable)

15822 73<sup>rd</sup> TERRACE NORTH

City

PALM BEACH GARDENS

FL

Zip Code

33418

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 CAROL E. ADAMS CAROL E. ADAMS SEC-TREAS.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/18/03

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ADAMS, G. JAMES  
STREET ADDRESS 12922 PROSPERITY FMS RD  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☒ Delete

TITLE V  
NAME ADAMS, CAROL E.  
STREET ADDRESS 12922 PROSPERITY FMS RD  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☒ Delete

TITLE ST  
NAME ADAMS, JAMES F.S.  
STREET ADDRESS 12922 PROSPERITY FARMS RD.  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME ADAMS, JAMES F.S.  
STREET ADDRESS 15822 73<sup>rd</sup> TERR. N.  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 ☒ Change ☐ Addition

TITLE ST  
NAME ADAMS, CAROL E.  
STREET ADDRESS 15822 73<sup>rd</sup> TERR. N.  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 ☒ Change ☐ Addition

TITLE VD  
NAME ADAMS, LANI E.  
STREET ADDRESS 3717 CANARY DRIVE  
CITY-ST-ZIP IRVING, TX 75062 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

CR2E034 (10/02)

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:

CAROL E. ADAMS CAROL E. ADAMS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEC-TREAS.

2/18/03

Date

(561) 745-9094

Daytime Phone #