


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 08:00 A
Secretary of State

DOCUMENT # F01000003586 1. Entity Name NATIONWIDE HOMES, INCORPORATED	
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Principal Place of Business 1100 RIVES ROAD MARTINSVILLE, VA 24115	Mailing Address P.O. BOX 5511 MARTINSVILLE, VA 24115
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number 54-1504881	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WATSON, TONY K 1100 RIVES ROAD MARTINSVILLE, VA 24115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOLCOMB, JANE 15303 DALLAS PKWY STE800 ADDISON, TX 75001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOODIN, DAN 1100 RIVES ROAD MARTINSVILLE, VA 24115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KEENER, LARRY 15303 DALAS PKWY STE 800 ADDISON, TX 75001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS TACKE, KELLY 15303 DALAS PKWY STE 800 ADDISON, TX 75001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/20/06-80023-020-550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Kelly Tacke Kelly Tacke **5/1/06** **972.764.9319**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #