2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000064932

1. Entity Name
HD BUILDER SOLUTIONS GROUP, INC.

Principal Place of Business	Mailing Address
2455 PACES FERRY ROAD ATLANTA, GA 30339	2455 PACES FERRY ROAD ATLANTA, GA 30339

DO NOT WRITE IN THIS SPACE

05062004 No Chg-P CR2E034 (10/03)

4. FEI Number
02-0647515

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	BLAKE, FRANCIS S
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	VSD
NAME	FERNANDEZ, FRANK L
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	VTD
NAME	TOME, CAROL B
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	P
NAME	FIKSE, MARK E
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	AS
NAME	MAZZONE, DOMINIC C
STREET ADDRESS	2455 PACES FERRY ROAD
CITY-ST-ZIP	ATLANTA, GA 30339
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Dominic C. Mazzone 5/11/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #