

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22601

FILED
Jan 29, 2004
Secretary of State

Entity Name: LUCIA CUSTOM HOME DESIGNERS, INC.

Current Principal Place of Business:

1650 LEE ROAD
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1650 LEE ROAD
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-2085886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASSIK, KAREN R
129 HOLTZ DRIVE
CASSELBERRY, FL 32707

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: V () Delete
Name: LUCIA, JAMES C,
Address: 517 MASON ST.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PST () Delete
Name: KASSIK, KAREN R.,
Address: 129 HOLTZ DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V () Change (X) Addition
Name: GORDON VICTOR MONDAY,
Address: 5245 ANDRUS ST
City-St-Zip: ORLANDO, FL 32810

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: KAREN R. KASSIK

PST

01/29/2004

Electronic Signature of Signing Officer or Director

Date