

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G73743

Entity Name: LEDMAN HOMES, INC.

FILED  
Feb 04, 2004  
Secretary of State

## Current Principal Place of Business:

3614 PRESERVE BLVD  
PANAMA CITY, FL 32408 US

## New Principal Place of Business:

## Current Mailing Address:

3614 PRESERVE BLVD  
PANAMA CITY, FL 32408 US

## New Mailing Address:

FEI Number: 59-2369718      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEDMAN, WILBUR T.  
3614 PRESERVE BLVD  
PANAMA CITY BEACH, FL 32408 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: LEDMAN, WILBUR T.  
Address: 3614 PRESERVE BLVD  
City-St-Zip: PANAMA CITY, FL 32408

Title: STD ( ) Delete  
Name: LEDMAN, MELANIE A.,  
Address: 3614 PRESERVE BLVD  
City-St-Zip: PANAMA CITY, FL 32408

Title: V ( ) Delete  
Name: LEDMAN, RANDY A  
Address: 3649 PRESERVE BLVD.  
City-St-Zip: PANAMA CITY, FL 32408

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition  
Name: LEDMAN, RANDY A  
Address: 3219 MAGNOLIA ISLAND BLVD.  
City-St-Zip: PANAMA CITY, FL 32408

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: WILBUR T. LEDMAN

P

02/04/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date