

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 09, 2006 8:00 am**  
**Secretary of State**

05-09-2006 90077 032 \*\*\*158.75

**DOCUMENT # H37355**

1. Entity Name  
**UNIQUE HOMES INVESTMENTS, INC.**



Principal Place of Business

803 E. WASHINGTON ST.  
ORLANDO, FL 32801 US

Mailing Address

803 E. WASHINGTON ST.  
ORLANDO, FL 32801 US

**DO NOT WRITE IN THIS SPACE**



04242006 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-2731268

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

DAVIS, MARGARET  
1365 HIBISCUS AVE  
WINTER PARK, FL 32789

**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 Margaret A. Davis, CEO, President / Margaret A. Davis

4/28/06

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

(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. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	CEO, P
NAME	DAVIS, MARGARET A
STREET ADDRESS	1365 HIBISCUS AVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	D
NAME	CORDERO, GEORGE W
STREET ADDRESS	6915 BEACON HOLLOW
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	TSVP
NAME	PETERS, PARNIE
STREET ADDRESS	6302 BEAR LAKE TERR.
CITY-ST-ZIP	APOPKA, FL 32703
TITLE	M
NAME	DROUILLARD, MONICA
STREET ADDRESS	1365 HIBISCUS AVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: Margaret A. Davis, CEO, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/06 4674259982

Date

Daytime Phone #