2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 03, 2006 08:00 AM Secretary of State DOCUMENT # H55423 1. Entity Name JAMELIN CUSTOM HOMES, INC. Principal Place of Business Mailing Address 12597 SPRING HILL DR. 12597 SPRING HILL OR SPRING HILL, FL 34609 SPRING HILL, FL 34609 CR2E034 (11/05) 01092006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4 FFI Number 59-2532695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent WISNIEWSKI, JAMES M. DO NOT WRITE 10199 RIDGE TOP LOOP **BROOKSVILLE, FL 34613** IN THIS SPACE t. 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 Signature, typed or printed name of registered agent and title it applicable (PIOTE: Registered Agent algorithms required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DV/ mle NAME WISNIEWSKI, JAMES M. STITLET ADDRESS 10199 RIDGE TOP LOOP U00000489730 CITY-ST-ZIP BROOKSVILLE, FL 34613 04/18/06-80029-006 150.0 ST MILE WISNIEWSKI, LINDA NAME STREET ADDRESS 10199 RIDGE TOP LOOP CITY-57-27P **BROOKSVILLE, FL 34613** TITLE MAME STREET ADDRESS DO NOT WRITE CITY - ST - 207 IN THIS SPACE MARKET STREET ADDRESS CTTY - ST - ZIP me NAME STREET ADDRESS CITY-ST-ZIP BILE

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 it made under only, 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.

final in

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR

A J. WISNIEWSKI

131/06 (352) 684.65

FILED