2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 16, 2005 8:00 am

1. Entity Nam	MENT # H82759 HOMES, INC.	s		S		ry of Sta 0030 005 ***150.	
Principal Plac	e of Business	Mailing Address		-			
PERNANDINA BEACH FL 32034 FERNANDINA BCH FL 32034				TO THE STATE OF TH			
US FOR STANDARD TO				L INTERPIL EXTEL INTER MENT LEGEN EXTER FOR BITCH BITCH EXTENDED FOR GIVEN BITCH BITCH BITCH BITCH BITCH BITCH			
	Place of Business SADLER ROAD	3. Mailing Address	LER ROP	-			
Suite, Apt.	#, etc.	Suite Apt. #, etc.	· CLE PO	┥	MOORE	CR2E034 (10/04)	
_ City & Stat		City & State	+ BOU.FL	4. FEI Numbe	59-286701	^ ⊑	Applied For
Zip -	Country	FER NANDINI	Country	5 Certificate	of Status Desired	S \$8.75 A	Not Applicable
300	6. Name and Address of Current F	Segistered Agent	7		Address of New F	Fee Requ	red
			Name				
POOLE, WESLEY R. 303 CENTRE ST., S-200 (PO BOX 1280) FERNANDINA BEACH FL 32034			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
			City			FL Zip C	ode
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its re	gistered office or regis	tered agent, or bot	h, in the State of Fl	orida. I am familiar wi	h, and accept
SIGNATURE							
- Standardanous	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	egistered Agent signature requi	red when reinstating)		DATE	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.00 k Payable to Florida Department of	State	·		9. Election Camp Trust Fund Co		5.00 May Be Ided to Fees
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECTO	PRS IN 11
THILE	PD SYLVIA D	☐ Delete	TITLE			☐ Chang	e 🔲 Addition
NAME STREET ADDRESS	GEDEON, SYLVIA P. 2906 EASTWIND DR		NAME STREET ADDRESS		•		
CITY-ST-ZIP	FERNANDINA BEACH FL 32034		CITY-ST-ZIP				
TITLE	SD SECOND	☐ Delete	TITLE				
NAME STREET ADDRESS	GEDEON, JENNIFER D		i			☐ Chang	e 🔲 Addition
	2906 FASTWIND DR		NAME			☐ Chang	e 🔲 Addition
CITY-ST-ZIP	2906 EASTWIND DR FERNANDINA BEACH FL 32034		i			☐ Chang	e 🔲 Addition
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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.

blem SYLVIA P. GEDEON