


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 10, 2007 8:00 am**  
**Secretary of State**

07-10-2007 90007 033 \*\*\*150.00


DOCUMENT # L06279	
1. Entity Name HOUSE PLANS BY BONNIE, INC.	

Principal Place of Business 1555 KINGSLEY AVE. STE-406 ORANGE PARK, FL 32073 US	Mailing Address 1555 KINGSLEY AVE. STE-406 ORANGE PARK, FL 32073 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2960551	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

07032007 Chg-P CR2E034 (12/06)



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

STEWART, BONNIE MAE  
 1555 KINGSLEY AVE., SUITE 406  
 ORANGE PARK, FL 32073

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees  
 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SP STEWART, BONNIE MAE 1555 KINGSLEY AVE., SUITE 406 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2007**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Bonnie Stewart Date: 7-9-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40124068  
# 206 279

House Plans By Bonnie, Inc.  
1555 Kingsley Ave.  
Suite 406  
Orange Park, Fl.32034

Florida Department of State  
Division of Corporations  
P.O. Box 8700  
Tallahassee, Fl. 32314

July 5, 2007

To Whom It May Concern:

I am writing to request abatement of the \$400.00 late filing fee for filing our Annual Report after May 1, 2007. The reason we did not file by the date required is that we never received our postcard to request the form, also we rely on our accountants to handle this matter. In the past we have used the forms provided to submit the information and payment in a timely manner.

Thank you for your consideration

*Bonnie Stewart*

Bonnie M. Stewart