

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

APPROVED
AND
FILED

08 JAN 29 PH 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L36069

1. Entity Name
ODEN HOMES, INC.



Principal Place of Business
6201 CORTEZ ROAD W.
BRADENTON, FL 34210 US

Mailing Address
6201 CORTEZ ROAD W.
BRADENTON, FL 34210 US



REINSTATEMENT 07

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0171809

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ODEN, JANET M.
6201 CORTEZ ROAD W.
BRADENTON, FL 34210

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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

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PDAS
NAME ODEN, KEVIN S.
STREET ADDRESS 6201 CORTEZ ROAD W.
CITY-ST-ZIP BRADENTON, FL 34210

TITLE VSTD
NAME ODEN, JANET M.
STREET ADDRESS 6201 CORTEZ ROAD W.
CITY-ST-ZIP BRADENTON, FL 34210

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

800113266698
12/19/07--01009--015 **\$50.00

800113266698
02/14/08--01046--016 **\$350.00

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #