

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90023 005 ***150.00

DOCUMENT # L59201					
1. Entity Name PETZ CUSTOM HOMES, INC.					
Principal Place of Business 6222 TOWER LANE B-3 SARASOTA, FL 34240 US			Mailing Address 6222 TOWER LANE B-3 SARASOTA, FL 34240 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
PETZOLDT, CURTIS T. 6222 TOWER LANE B3 SARASOTA, FL 34240				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL
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 _____ (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. <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETZOLDT, CURTIS TODD	<input type="checkbox"/> Delete		NAME	
STREET ADDRESS	1703 BAYSHORE RD			STREET ADDRESS	
CITY-ST-ZIP	NOKOMIS, FL 34275			CITY-ST-ZIP	
TITLE	VP			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID, RUDISILL	<input type="checkbox"/> Delete		NAME	
STREET ADDRESS	3311 92ND AVE. E.			STREET ADDRESS	
CITY-ST-ZIP	PARRISH, FL 34219			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
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: <i>X David Rudisill v.p.</i>				Date: <i>3/16/06</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	