

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L77937

1. Entity Name
HOMES BY HANDLEY, INC.



Principal Place of Business

% WILLIAM R. HANDLEY
2636 MELLOW LANE
SEBRING, FL 33870-4966

Mailing Address

% WILLIAM R. HANDLEY
2636 MELLOW LANE
SEBRING, FL 33870-4966



02252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0203620

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HANDLEY, WILLIAM R.
2636 MELLOW LANE
SEBRING, FL

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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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HANDLEY, WILLIAM R.
STREET ADDRESS	2636 MELLOW LANE
CITY-ST-ZIP	SEBRING, FL
TITLE	ST
NAME	HANDLEY, PATRICIA W
STREET ADDRESS	2636 MELLOW LANE
CITY-ST-ZIP	SEBRING, FL 338704966
TITLE	VP
NAME	HANDLEY, II, WILLIAM R
STREET ADDRESS	2636 MELLOW LANE
CITY-ST-ZIP	SEBRING, FL 338704966
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000856990
03/28/08-80035-004 158.75

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:

William R Handley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/08

Date

(863) 385-2732

Daytime Phone #