## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT

## DOCUMENT # P00000022392

FLORIDA HOMES INTERNATIONAL, INC.



**FILED** May 01, 2006 08:00 Al Secretary of State

Fee Required

Principal Place of Business

Mailing Address

320 BALMORAL COURT DAVENPORT, FL 33896 717 EAST OAK STREET KISSIMMEE, FL 34744



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04042006 No Cha-P CR2E034 (11/05) Applied For 4. FEI Number 59-3625181 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 

6. Name and Address of Current Registered Agent

HENRY, ADRIENNE 320 BALMORAL COURT DAVENPORT, FL. 33896

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the pons of registered agent.	urpose of changing its registe	red office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept					
SIGNATURE_				<u> </u>	· · · · · · · · · · · · · · · · · · ·					
Signature, typed or printed name of registered agent and able it applicable (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 Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	TORS								
NAME STREET ADDRESS CITY-ST-ZIP	DPST HENRY, ADRIENNE 320 BALMORAL COURT DAVENPORT, FL 33896				U00000352558 05/15/06-80017-003 15D.00					
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12 Thereby o	ertify that the information supplied with this file	ling does not qualify for the e-	vemotions cou	itained in Chapter 119	Porida Statutes. I further certify that the information					

Interest certary that the information supplied with this little goes not quality 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: 1

SIGNATURE AND TYPED OR PRINTED WAS OF SIGNING OFFICER OR DIRECTOR

2006 Date 863-206-7741 APB

Daytime Phone #