

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000020896

1. Entity Name  
SOLUTION HOME BUYER'S, INC.



Principal Place of Business  
3035 W GLEN ST  
LECANTO, FL 34461

Mailing Address  
P O BOX 489  
HOMOSASSA, FL 34487

**DO NOT WRITE IN THIS SPACE**



01132008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3700177

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134

**DO NOT WRITE  
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 NAME STREET ADDRESS CITY-ST-ZIP	PD KELLEY, OLIVER H 3035 W GLEN ST LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PHELPS, JOHN T 3035 W GLEN ST LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KELLEY, RUTH R 3035 W GLEN ST LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/16/08-80075-008 150.00

000000784920  
01/16/08-80075-008 150.00

**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:

*Ruth R. Kelley*  
RUTH R. KELLEY, Sect. Pres.

1-3-08

Date

(352) 628-3456

Daytime Phone #