2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000041902

Address:

City-St-Zip:

Entity Name: ACCENT CUSTOM HOMES, INC

FILED Apr 12, 2005 Secretary of State

		00010	W 110W20, 1140.					
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
	VAN ROAD RT RICHEY, FL	34653						
Current Mailing Address:				New Mailing Address:				
	VAN ROAD RT RICHEY, FL	34653						
FEI Number	: 59-3716595	FEI Nu	mber Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and	Address of (Current F	Registered Agent:	Name and	Address	of New Registered Agent:		
6235 ROW	GORIS, JOHN VAN ROAD RT RICHEY, FL	. 34653	US					
	named entity e of Florida.	submits t	his statement for the p	ourpose of changing i	ts registere	ed office or registered agent, or both,		
SIGNATU	RE:							
Electronic Signature of Registered Agent				ent		Date		
Election Car	mpaign Financin	g Trust Fu	nd Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	DPTS (VASSILAGORI 6235 ROWAN NEW PORT RI	ROAD	34653	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	V (SAWYER, GRI 6235 ROWAN NEW PORT RI	ROAD	34653	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	DV (PANOPOULOS 635 ROWAN R NEW PORT RI	OAD	34653	Title: Name: Address: City-St-Zip:	6235 ROW	(X) Change () Addition ILOS, JOANNA I/AN ROAD T RICHEY, FL 34653		
Title: Name:	() Delete		Title: Name:	V LALIOTIS,	() Change (X) Addition STAVROS		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

6235 ROWAN ROAD NEW PORT RICHEY, FL 34653

SIGNATURE: JOHN VASSILAGORIS P 04/12/2005