


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

04-21-2006 90115 010 ***150.00

DOCUMENT # P01000052954 1. Entity Name SOUTHWEST LUXURY HOMEBUILDERS, INC.	
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Principal Place of Business 914 MAC EWEN DR. OSPREY, FL 34229	Mailing Address P. O. BOX 730 OSPREY, FL 34229
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50014417



03172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1123119	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent NAIDEL, JEFFREY L 320 N RIVER RD VENICE, FL 34293
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**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, 2006 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	P NAIDEL, JEFFERY 320 N RIVER RD VENICE, FL 34293
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS NAIDEL, PATRICIA A 914 MACEWEN DRIVE OSPREY, FL 34229
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**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 Patricia A Naidel **PATRICIA A NAIDEL** 4-19-06 941-946-6538
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #