FILED
Jan 25, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000054957

1. Entity Name
STEPHEN INGRAM CUSTOM BUILDING,INC.

Principal Place of Business	Mailing Address
916 DON BISHOP RD. SANTA ROSA BEACH, FL 32459 US	916 DON BISHOP RD. SANTA ROSA BEACH, FL 32459 US

DO NOT WRITE IN THIS SPACE

01212005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3721403
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

INGRAM, SHARON S
916 DON BISHOP RD
SANTA ROSA BEACH, FL 32459

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Unnnn195318
01/26/05-80024-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	INGRAM, STEPHEN M
STREET ADDRESS	916 DON BISHOP RD.
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	S
NAME	INGRAM, SHARON S
STREET ADDRESS	916 DON BISHOP RD
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

STEPHEN M INGRAM

SIGNATURE: Stephen M Ingram Pres 1-21-05 850-267-1403
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #