

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 15, 2007 8:00 am**  
**Secretary of State**

05-15-2007 90007 034 \*\*\*150.00

**DOCUMENT # P01000061951**

1. Entity Name  
**MEIER HOMES, INCORPORATED**



Principal Place of Business  
**6143 11TH AVE SOUTH  
GULF PORT, FL 33707**

Mailing Address  
**6143 11TH AVE SOUTH  
GULF PORT, FL 33707**



04242007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3729731**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MEIER, BEAT  
6143 11TH AVE SOUTH  
GULF PORT, FL 33707**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 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	PTS MEIER, BEAT J 1765 SANTA ANNA DR DUNEDIN, FL 34608 <i>6143 11th Ave So. Gulf Port, FL 33707</i>
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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 an other like empowered.

**SIGNATURE:** *Beat Meier*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4-26-07* *727 656-4520*  
Date Daytime Phone #