## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jun 14, 2007 8:00 am Secretary of State 06-14-2007 90001 031 \*\*\*150.00 DOCUMENT # P01000106717 THOMAS TALLAKSEN CUSTOM HOMES, INC. Principal Place of Business Mailing Address 40120720 6 ZINZENDORF PL 6 ZINZENDORF PL PALM COAST, FL 32164 PALM COAST, FL 32164 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 06082007 Cha-P City & State City & State 4 FEI Number Applied For 59-3757723 Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TALLAKSEN, JULIE A Street Address (P.O. Box Number is Not Acceptable) **6 ZINZENDORF PLACE** PALM COAST, FL 32164 City Zip Code 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution Due by September 14, 2007 Added to Fees corporation did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Change Delete TITLE OnitibhA TALLAKSEN, THOMAS C NAME NAME STREET ADDRESS 6 ZINZENDORF PL STREET ADDRESS PALM COAST, FL 32164 CITY ST ZIP CITY ST ZIP TS TITLE ☐ Delete ☐ Change Addition TALLAKSEN, JULIE NAME NAME STREET ADDRESS STREET ADDRESS 6 ZINZENDORF PL CITY-ST-ZIP PALM COAST, FL 32164 CITY-ST-ZIP TITLE ☐ Change ☐ Delate TILLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE

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 of 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 hment with an address, with all other like empowered.

STREET ADDRESS

CITY ST ZIP

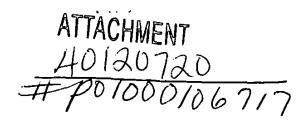
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NAME

STREET ADDRESS

CITY-ST-ZIP

Julie Tallarsen Collison 286



Thomas Tallaksen Custom Homes Inc. 503 S. Old Dixie Hwy. Bunnell, FL 32110 386 437-2997

May 1, 2007

To Whom It May Concern:

Enclosed please find our check in the amount of \$150.00 for the annual report. Our number is P01000106717. We have tried to pay this online for 3 days. I have tried to download the form also and cannot. I called your office and spoke to "Mike" at the online help line and he informed me that there is a problem with the computers and we can mail a check with our explanation of what happened.

We have been trying to pay this on time and don't feel we should be charged the late fee as the computers are not working correctly. I have also e-mailed this to confirm that we have been trying.

Please send me a confirmation of some kind that I did pay this. Our e-mail is The Taily Team a pethnet.

[hank-you

Thomas Tallaksen Custom Homes