

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119644

Entity Name: CAPTAIN HOMES, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

514 MEADOW SWEET CIRCLE
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

514 MEADOW SWEET CIRCLE
OSPREY, FL 34229

New Mailing Address:

FEI Number: 02-0650686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, CLIFFORD M
2033 MAIN STREET STE 303
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MERRILL, DAWN
Address: 4812 HANGING MOSS LANE
City-St-Zip: SARASOTA, FL 34238 US

Title: P () Delete
Name: MERRILL, ROBERT W
Address: 514 MEADOW SWEET CIRCLE
City-St-Zip: OSPREY, FL 34229 US

Title: V () Delete
Name: MERRILL, DAVID E
Address: 4812 HANGING MOSS LANE
City-St-Zip: SARASOTA, FL 34238 US

Title: T () Delete
Name: MERRILL, GRAZYNA
Address: 514 MEADOW SWEET CIRCLE
City-St-Zip: OSPREY, FL 34229 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBERT MERRILL

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date