

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000089

FILED
Feb 05, 2006
Secretary of State

Entity Name: INDIAN RIVER CUSTOM BUILDERS, INC.

Current Principal Place of Business:

13537 US HWY #1 SUITE 132
SEBASTIAN, FL 32958

New Principal Place of Business:

13537 US HWY #1
132
SEBASTIAN, FL 32958

Current Mailing Address:

13537 US HWY #1 SUITE 132
SEBASTIAN, FL 32958

New Mailing Address:

13537 US HWY #1
132
SEBASTIAN, FL 32958

FEI Number: 30-0138620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAILEY, ROBERT W
286 COLUMBUS STREET
SEBASTIAN, FL 32958 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: PD () Delete
Name: GAILEY, ROBERT W
Address: 286 COLUMBUS STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: S () Delete
Name: GAILEY, MICHELE
Address: 286 COLUMBUS STREET
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, 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 W GAILEY

PD

02/05/2006

Electronic Signature of Signing Officer or Director

Date