2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P0300007467 1. Entity Name D & H CUSTOM BUILDERS, INC.				Secretary of State
Principal Place of Business		Mailing Address		
2878 CHELTON ROAD SOUTH JACKSONVILLE FL 32216		2878 CHELTON ROAD SOUTH JACKSONVILLE FL 32216		
2. Principal Place of Business		3. Mailing Address		t legited in agree one extra serie s
Suite, Apt. If, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)
City & State		City & State		4. FEI Number 82-0586578 Applied For Not Applied For
Zip	Country	Zip	Country	Certificate of Status Desired
	6. Name and Address of Current i	Registered Agent		7. Name and Address of New Registered Agent
			Name	
PRICE, HENRY W 2878 CHELTON ROAD SOUTH JACKSONVILLE FL 32216			Street Address	(P.O. Box Number is Not Acceptable)
			City	FL Zip Code
After	Signature, typed or pretted name of registered apent a FILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00 k Payable to Florida Department of	er anterior (A)	Registered Agent signature requir	9. Election Campaign Financing \$5.00 May 8: Trust Fund Contribution. \(\begin{array}{ccccc} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRICE, HENRY W 2878 CHELTON ROAD SOUTH JACKSONVILLE FL 32216	☐ Defete	TISLE NAME STREET ADDRESS CITY-ST-ZIP	UGOOGA428434 02/21/05-80046-022 150.00
TITLE MAME STREET ADDRESS CITY-ST-ZIP	VP PRICE, DAVID A 6200 CREETOWN DRIVE JACKSONVILLE FL 32216	☐ Delete	137LE NAME SIREET ADDRESS CHY-SI-ZIP	☐ Change ☐ Addition
THTLE NAME STREET ADDRESS CHY-ST-ZIP	SEC PRICE, GLORIA N 2878 CHELTON ROAD SOUTH JACKSONVILLE FL 32216	□ Celete	HRE NAME STREEL ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
THICE NAME STREET ADDRESS CHY-\$T-ZIP	TRES HUTTENLOCHER, KELLIE P 3019 REX DRIVE SOUTH JACKSONVILLE FL 32216	☐ Delete	TITLE NAME STRECT ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS GITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
CVLA-21-TIA WWWE CVLA-21-TIA THIFE		☐ Oefete	TULE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

FILED

Feb 09, 2006 08:00 AM

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE:

Price | 1/6 | 66 | 904 | 724-1621