## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000017657

8312 SKILE ROAD

NORTH PORT, FL 34287

Address:

City-St-Zip:

Entity Name: HOMES BY ALEXANDER CUSTOM BUILDERS, INC.

FILED Mar 06, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8312 SKILE ROAD NORTH PORT, FL 34287 **Current Mailing Address: New Mailing Address:** 8312 SKILE ROAD NORTH PORT, FL 34287 FEI Number: 81-0598297 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARBER, KEVIN 8312 SKILE RD NORTH PORT, FL 34287 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PTD ( ) Delete Title: () Change () Addition BARBER, KEVIN Name: Name: 8312 SKILE ROAD Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: Title: SD Title: () Delete (X) Change ( ) Addition Name: HEYES, HEATHER Name: HEYES, HEATHER

Address:

City-St-Zip:

8312 SKILE ROAD

NORTH PORT, FL 34287

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: KEVIN P BARBER PTD 03/06/2006