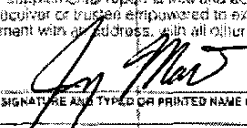


FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90252 047 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000052570			
1. Entity Name JD CUSTOM HOMES, INC.			
Principal Place of Business 14651 PALM BEACH BLVD 106-B FT. MYERS, FL 33905		Mailing Address 14651 PALM BEACH BLVD 106-B FT. MYERS, FL 33905	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-0028173		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		04272006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent KETCHUM, SCOTT M ESQ. 692 GOODLETTE RD. NORTH NAPLES, FL 34102		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ Signature, typed or printed name of registered agent and title if applicable		DATE _____ NOTE: Registered Agent signature required when resigning	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MARTINEZ, JEREMY C 13486 CARRIBEAN FT. MYERS, FL 33905	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD MONACELL, DAVID A 6821 TECH ST FORT MYERS, FL 33905	☐ Delete	☒ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP 14180 OUXE HIGHWAY ALVA, FL 33420
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
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 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: 		4/27/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

ATTACHMENT

60035004

P03000052510

Filing Instructions

2006 Uniform Business Report

Name: JD Custom Homes, Inc.

Date Due: On or before May 1, 2006

Remittance: A check in the amount of \$150 should be made payable to the Florida Department of State

Signature: The original return should be signed and dated on Page 1 at the red check marks by an authorized officer of the corporation

Mail To: Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

MAIL