

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056819

**FILED**  
**Feb 17, 2006**  
**Secretary of State**

**Entity Name:** CANTERBURY ESTATE HOMES, INC.

**Current Principal Place of Business:**

195 WELLINGTON DR  
PALM COAST, FL 32164

**New Principal Place of Business:**

4721 E. MOODY BLVD  
SUITE 108  
BUNNELL, FL 32110

**Current Mailing Address:**

195 WELLINGTON DR  
PALM COAST, FL 32164

**New Mailing Address:**

4721 E. MOODY BLVD  
SUITE 108  
BUNNELL, FL 32110

**FEI Number:** 20-0234754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOWELL, SIDNEY M ESQ.  
300 N STATE STREET  
BUNNELL, FL 32110 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: D ( ) Delete  
Name: RICHARDSON, NOEL  
Address: 195 WELLINGTON DR  
City-St-Zip: PALM COAST, FL 32164

Title: D ( ) Delete  
Name: HERON, HERBERT  
Address: 195 WELLINGTON DR  
City-St-Zip: PALM COAST, FL 32164

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RICHARDSON, NOEL  
Address: 4721 E. MOODY BLVD, SUITE 108  
City-St-Zip: BUNNELL, FL 32110

Title: D (X) Change ( ) Addition  
Name: HERON, HERBERT  
Address: 4721 E. MOODY BLVD, SUITE 108  
City-St-Zip: BUNNELL, FL 32110

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:** NOEL RICHARDSON

VP

02/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date