

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2007 08:00 A
Secretary of State

DOCUMENT # P03000088036

1. Entity Name
CAMERON HARROD HOME, INC.



Principal Place of Business

**506 S. PINEAPPLE AVE
SARASOTA, FL 34236 US**

Mailing Address

**506 S. PINEAPPLE AVE
SARASOTA, FL 34236 US**



03212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FBI Number
41-2107993

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TALLEY, JAMES M
20 N ORANGE AVE
SUITE 1500
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

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 of the person authorized to change the registered office and the registered agent.

(NOTE: Registered Agents must be qualified under chapter 607.)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P. S HELPHENSTINE, LISA J 4054 S. SHADE AVE SARASOTA, FL 34231
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04/13/07-80026-010 158.75

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/07

941-951-6471

DATE

DAYTIME PHONE