## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## Mar 12, 2008 08:00 AN Secretary of State DOCUMENT # P03000119755 1. Entity Name ED WIRE HOMES, INC. Principal Place of Business Mailing Address 4282 CARDINAL BLVD. 4282 CARDINAL BLVD. WILBUR BY THE SEA, FL 32127 WILBUR BY THE SEA, FL 32127 02232008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0354946 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WIRE, EDWARD M DO NOT WRITE 4282 CARDINAL BLVD. WILBUR BY THE SEA, FL 32127 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 | am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U000000356247 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PD WIRE, EDWARD M NAME STREET ADDRESS 570 HEATHER LANE CITY-ST-ZIE ORANGE CITY, FL 32763 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WR CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with his 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 accordate and that my signature shall have the same legal effect as if made under outbright I am an officer or director of the corporation or the receiver or trustee encovered to precite this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

indicated on this report or supplement of the corporation or the receiver or trichanged, or on an attachment with ag

**SIGNATURE** 

**FILED**