

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90270 014 ***150.00

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DOCUMENT # P03000127418 1. Entity Name P C HOME BUILDERS, INC.					
Principal Place of Business 2668 TANSBORO DRIVE DELTONA, FL 32725 US			Mailing Address 2668 TANSBORO DRIVE DELTONA, FL 32725 US		
2. Principal Place of Business 1850 S. BOUNDARY ST Suite, Apt. #, etc.		3. Mailing Address 1850 S. BOUNDARY ST. Suite, Apt. #, etc.		04182005 Chg-P CR2E034 (10/03)	
City & State Deltona FL		City & State Deltona FL		4. FEI Number 57-1192944	
Zip 32720		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEGALZOOM NEVADA INC 44 W. FLAGLER ST. SUITE 675 MIAMI, FL 33130			7. Name and Address of New Registered Agent Name Christopher M. Burns Street Address (P.O. Box Number is Not Acceptable) 1850 S. BOUNDARY ST. City Deltona FL Zip Code 32720		
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 <u>Christopher M Burns</u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PRES BURNS, CHRISTOPHER M <input type="checkbox"/> Delete 2668 TANSBORO DRIVE DELTONA, FL 32725		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Burns, Christopher M. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1850 S. BOUNDARY ST. DELTONA FL 32720	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BURNS, PATRICIA S <input checked="" type="checkbox"/> Delete 2668 TANSBORO DRIVE DELTONA, FL 32725		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Christine L. Burns <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2668 TANSBORO DR. DELTONA FL 32725	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Christopher M. Burns</u> Christopher M. Burns <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date _____ Daytime Phone # 386-736-4245		