

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138001

FILED  
Mar 20, 2007  
Secretary of State

Entity Name: INNOVATIVE CUSTOM BUILDERS INC

## Current Principal Place of Business:

11923 PINE FOREST DR.  
NEW PORT RICHEY, FL 34654 US

## New Principal Place of Business:

## Current Mailing Address:

11923 PINE FOREST DR.  
NEW PORT RICHEY, FL 34654 US

## New Mailing Address:

FEI Number: 20-0422279      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALLAHAN, MARCI K  
9679 LAKEVIEW DRIVE  
NEW PORT RICHEY, FL 34654 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: P ( ) Delete  
Name: GALLAHAN, MARCI K  
Address: 9679 LAKEVIEW DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP ( ) Delete  
Name: GALLAHAN, ROBERT  
Address: 9679 LAKEVIEW DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP ( ) Delete  
Name: FONTES, RALPH  
Address: 1009 SOUTH HILLCREST  
City-St-Zip: CLEARWATER, FL 33756 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: GALLAHAN, MARCI K  
Address: 9679 LAKEVIEW DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

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: MARCI K. GALLAHAN

P

03/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date