


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 01, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P03000140586 1. Entity Name KOZINKO CUSTOM HOMES, INC. |  |
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| Principal Place of Business 9865 S.W. 206TH CIRCLE DUNNELLON, FL 34431 | Mailing Address 9865 S.W. 206TH CIRCLE DUNNELLON, FL 34431 |
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DO NOT WRITE IN THIS SPACE



02262007 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 75-3139465 | Applied For Not Applicable |
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| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent KOZINKO, DONALD M 9865 S.W. 206TH CIRCLE DUNNELLON, FL 34431 |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KOZINKO, DONALD M 9865 S.W. 206TH CIRCLE DUNNELLON, FL 34431 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P KOZINKO, DONALD 9865 SW 206TH CIRCLE DUNNELLON, FL 34431 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V KOZINKO, NOAH 113 DELEWARE ST. TAVARES, FL 32778 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TS KOZINKO, CRYSTAL 9865 SW 206TH CIRCLE DUNNELLON, FL 34431 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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03/12/07-80022-023 158.75

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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 is a true and accurate 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.

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| SIGNATURE: <u>Donald M. Kozinko</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | <u>2/27/07</u> Date | <u>(352) 489-1139</u> Daytime Phone # |
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