

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90248 022 ***150.00

DOCUMENT # P04000041631

1. Entity Name
PERRY HOME BUILDERS INC



Principal Place of Business
720 NE 25TH AVENUE : 8
= 7
CAPE CORAL, FL 33909

Mailing Address
6720 NE 25TH AVENUE : 8
= 7
CAPE CORAL, FL 33909

2. Principal Place of Business - No P.O. Box #
1136 NE PINE ISLAND RD
Suite, Apt. #, etc.

3. Mailing Address
3515 SW 7TH TERRACE
Suite, Apt. #, etc.

City & State
CAPE CORAL, FLORIDA
Zip
33909
Country
USA

City & State
CAPE CORAL, FLORIDA
Zip
33991
Country
USA

4. FEI Number
20-0830881 **20-0830881**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ALL FLORIDA FIRM, INC.
465 S VOLUSIA AVE
STE C
ORANGE CITY FL 32763

7. Name and Address of New Registered Agent

Name
DAIN M. PERRY
Street Address (P.O. Box Number is Not Acceptable)
3515 SW 7TH TERRACE
City
CAPE CORAL **FL** **Zip Code**
33991

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 *Dain Perry* **4/29/08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) **DATE**

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PERRY DAIN 3515 SW 7TH TERR CAPE CORAL FL 33991	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PERRY JENEVERE 3515 SW 7TH TERR CAPE CORAL FL 33991	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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"/> Change <input type="checkbox"/> Addition

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: *Dain Perry* **4/29/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **DATE** Daytime Phone #

ATTACHMENT

MARY MORAN, CPA

CERTIFIED PUBLIC ACCOUNTANT

The Financial Center • 7370 College Parkway • Suite 201 • Fort Myers, Florida 33907
Phone: (239) 277-9000 • Fax: (239) 277-9100

5/1/08

40096955

Division of Corporations
Post Office Box # 1500
Tallahassee, Florida 32302-1500

Re: Penalty Waiver on Annual Report

Perry Home Builders, Inc.

Document # P04000041631

EIN 20-0830881

3515 SW 7th Terrace

Cape Coral, Florida 33991

Dear Sir,

We would like to abate the \$400 late penalty for the above-mentioned corporation. This Corporation never received the postcard in the mail because they changed locations and the postcard was not forwarded.

Thank you for your consideration. Should you have any questions, please don't hesitate to contact me.

Sincerely,

Mary K Moran, CPA

Mary K. Moran, C.P.A.