

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 8:00 am
Secretary of State

05-26-2006 90016 038 ***150.00

DOCUMENT # P05000030593

1. Entity Name
SUTTON HOMES & DEVELOPMENT, INC.



Principal Place of Business
**3511 W COMMERCIAL BLVD SUITE 307
FT LAUDERDALE, FL 33309**

Mailing Address
**3511 W COMMERCIAL BLVD SUITE 307
FT LAUDERDALE, FL 33309**

50019813



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05232006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOGBO, CHUCK
2800 W OAKLAND PARK BLVD SUITE 209
OAKLAND PARK, FL 33311**

Name **JAMES HOWARD**

Street Address (P.O. Box Number is Not Acceptable)

3511 W. COMMERCIAL BLVD # 307

City **FT. LAUDERDALE**

FL

Zip Code
33309

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	RICE, DAWN	
STREET ADDRESS	3511 W COMMERCIAL BLVD SUITE 307	
CITY- ST- ZIP	FT LAUDERDALE, FL 33309	
TITLE	COO	<input type="checkbox"/> Delete
NAME	HOWARD, JAMES	
STREET ADDRESS	3511 W COMMERCIAL BLVD SUITE 307	
CITY- ST- ZIP	FT LAUDERDALE, FL 33309	
TITLE	CFOT	<input checked="" type="checkbox"/> Delete
NAME	MANGAROO, LENNOX	
STREET ADDRESS	3511 W COMMERCIAL BLVD SUITE 307	
CITY- ST- ZIP	FT LAUDERDALE, FL 33309	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES HOWARD

4/20/06

(954) 731-1657

Date Daytime Phone #