

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000123212

Entity Name: TRILOGY HOMES, INC.

**FILED**  
**Sep 11, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

17709 BRIDLEWOOD COURT  
PARRISH, FL 34219

**New Principal Place of Business:**

**Current Mailing Address:**

17709 BRIDLEWOOD CT.  
PARRISH, FL 34219

**New Mailing Address:**

FEI Number: 14-1975568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOY, WAYNE  
13647 2ND AVENUE NE.  
BRADENTON, FL 34212 US

**Name and Address of New Registered Agent:**

HOY, WAYNE  
17709 BRIDLEWOOD CT.  
PARRISH, FL 34219 US

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

09/11/2006

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: HOY, WAYNE  
Address: 3825 STATE RD 64 E.  
City-St-Zip: BRADENTON, FL 34212

Title: S/D ( ) Delete  
Name: HOY, BRENDA  
Address: 3825 STATE RD 64 E.  
City-St-Zip: BRADENTON, FL 34212

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: HOY, WAYNE D  
Address: 17709 BRIDLEWOOD CRT  
City-St-Zip: PARRISH, FL 34219

Title: VP/D (X) Change ( ) Addition  
Name: HOY, RYAN M  
Address: 335 BOW LANE  
City-St-Zip: BRADENTON, FL 34208

Title: S/D ( ) Change (X) Addition  
Name: PEACHEY, JAMES R  
Address: 5451 GANNAWAYST  
City-St-Zip: NORTH PORT, FL 34286

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: WAYNE HOY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P/D

09/11/2006

\_\_\_\_\_  
Date