## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 23, 2008 8:00 am Secretary of State 04-23-2008 90021 033 \*\*\*150.00

DOCUMENT # P05000154409  1. Entity Name HEUBACH HOMES, INC							04-23-20	008 90021	033 ***15	50.00
Principal Plac	e of Business	Mailing Address				1089				
24324 SILKBAY CT LUTZ, FL 33559		24324 SILKBAY CT LUTZ, FL 33559				40077642				
						1100000000000	<b>110 0</b> 111 <b>60</b> 11 <b>18</b> 11			HUET IN LEET
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04092008	Chg-P	CR2E	034 (12/06)	
City & State		City & State				4. FEI Number 74-3154			<del></del>	pplied For ot Applicable
Zip Country		Zip	Coun	try		5. Certificate of		ed 🗀	\$8.75 Add	litional
	6. Name and Address of Current	Registered Agent		ı		7. Name and /	Address of Ne	w Registerer		
				Name		7. (1447) 6114 7	100/000 0/ 110	w registered	, Agent	
HEUBACH, SANDRA M 24324 SILKBAY CT LUTZ, FL 33559				Street Address (P.O. Box Number is Not Acceptable)						
·				City				F	Zip Cod	e
8. The above	named entity submits this statement for	or the purpose of changing its	registere	ed office or i	register	ed agent, or both	, in the State o			and accept
SIGNATURE_	ions of registered agent.									
	Signature, typed or printed name of registered agen	and title if applicable. (NOT	b. Registere	d Agent signatur	e required	when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campa Trust Fund Cont		ncing	<b>\$5.</b> Add	00 May Be ed to Fees				
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/0	HANGES TO	OFFICERS AN	D DIRECTOR	S IN 11
TNLE	PRES	☐ Delete	TITLE						XXChange	☐ Addition
NAME	HEUBACH, SANDRA M		MAM	_	302	0 Kensi	natan	Ттпас		
STREET ADDRESS	5.45			ET ADDRESS			_		/ ( 0 0	
ÇITY-ST-ZIP	LUTZ, FL 33559		CITY	-\$1-ZIP	Tar	pon Spr	ings,	FL 3	4688	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	☐ Addition
TITLE	north Edd.	☐ Delete	TITLE	-		•				Addition
NAME			NAM						LL Crongo	
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST- ZIP						
TITLE		☐ Delete	TITLE						Change	Addition
NAME STREET ADDRESS			NAM	E Et address						
CITY-ST-ZIP				-ST-ZIP						
TITLE		☐ Defete	TITLE						Change	☐ Addition
NAME			NAM	Ε						
STREET ADORESS				ET ADDRESS						
CITY-ST-ZIP		<b>—</b>		-ST-ZIP						,
TITLE NAME: -		☐ Delete	HARA						Change	☐ Addition
STREET ADDRESS			NAM STRE	ET AODRESS						
CITY-ST-ZIP				-ST-ZIP				·		
12. I hereby of indicated of the cor	certify that the information supplied wit on this report or supplementary report	h this filing does not qualify to s true and accurate and that i	or the exe	emptions co	ontained ive the s	in Chapter 119, same legal effect	Florida Statute as if made und	es. I further co der oath; that	ertify that the in	nformation or director

changed, or on an attachment with an address, with all other like emp

SIGNATURE: