


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2007 8:00 am**  
**Secretary of State**

03-22-2007 90001 041 \*\*\*150.00

<b>DOCUMENT # P06000053381</b>	
--------------------------------	---

1. Entity Name  
**5D HOMES, INC.**

<b>Principal Place of Business</b> 1601 SIXTH ST SE WINTER HAVEN, FL 33880	<b>Mailing Address</b> 1601 SIXTH ST SE WINTER HAVEN, FL 33880
--	--

<b>2. Principal Place of Business - No P.O. Box #</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



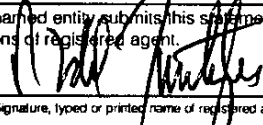
03192007 Chg-P CR2E034 (12/06)

<b>4. FEI Number</b> 20-4777156	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

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

<b>6. Name and Address of Current Registered Agent</b>  BRINSON, J. KEMP ESQ 255 MAGNOLIA AVE SW WINTER HAVEN, FL 33880
---

<b>7. Name and Address of New Registered Agent</b>
Name <b>R. TODD DANTZLER</b>
Street Address (P.O. Box Number is Not Acceptable) <b>1601 SIXTH ST. SE.</b>
City <b>WINTER HAVEN</b> FL Zip Code <b>33880</b>

<b>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.</b>
SIGNATURE  DATE <b>3-19-07</b>

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  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANTZLER, RICHARD E	NAME	
STREET ADDRESS	1601 SIXTH ST SE	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33880	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANTZLER, BRADLEY T	NAME	
STREET ADDRESS	1601 SIXTH ST SE	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33880	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANTZLER, CLARA N	NAME	
STREET ADDRESS	1601 SIXTH ST SE	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33880	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANTZLER, RICHARD	NAME	
STREET ADDRESS	1601 SIXTH ST SE	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33880	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANTZLER, R. TODD	NAME	
STREET ADDRESS	1601 SIXTH ST SE	STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN, FL 33880	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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:**

