

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

05-27-2008 90041 004 ***150.00

DOCUMENT # P07000002799

1. Entity Name
ACCURATE HOMES, INC.



Principal Place of Business
3038 LINDA DRIVE
LAKELAND, FL 33810

Mailing Address
3038 LINDA DRIVE
LAKELAND, FL 33810



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01172008

Chg-P

CR2E034 (12/06)

4. FEI Number

20-8126349

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, CHRISTOPHER L
3038 LINDA DRIVE
LAKELAND, FL 33810

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Print Name and Title of Agent (Do not print if agent is a corporation)

Print Name and Title of Registered Agent (Do not print if agent is a corporation)

DATE

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

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D ☐ Delete
NAME: HALL, CHRISTOPHER L
STREET ADDRESS: 3038 LINDA DRIVE
CITY, ST, ZIP: LAKELAND, FL 33810

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY, ST, ZIP: ☐ Delete

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NAME: ☐ Delete
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TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY, ST, ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PRESIDENT ☒ Change ☐ Add
NAME: ☐ Change ☐ Add
STREET ADDRESS: ☐ Change ☐ Add
CITY, ST, ZIP: ☐ Change ☐ Add

TITLE: Secretary/Treasurer ☐ Change ☒ Add
NAME: Cori N. Hall
STREET ADDRESS: 3038 Linda Dr
CITY, ST, ZIP: Lakeland FL 33810

TITLE: ☐ Change ☐ Add
NAME: ☐ Change ☐ Add
STREET ADDRESS: ☐ Change ☐ Add
CITY, ST, ZIP: ☐ Change ☐ Add

TITLE: ☐ Change ☐ Add
NAME: ☐ Change ☐ Add
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CITY, ST, ZIP: ☐ Change ☐ Add

TITLE: ☐ Change ☐ Add
NAME: ☐ Change ☐ Add
STREET ADDRESS: ☐ Change ☐ Add
CITY, ST, ZIP: ☐ Change ☐ Add

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, changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Expiring Date #

ATTACHMENT

40105197
#P07000002799

To Whom It May Concern,

I am writing to you to ask that you abate the \$400 penalty. Work has been really tight lately, and this is the first opportunity that I have had to pay. Thank you so much for your time.

Thanks Again,
Christopher L Hall

A handwritten signature in black ink, appearing to read 'CHall', located below the typed name.