

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90015 013 ***150.00

DOCUMENT # P20966

1. Entity Name
NOBLE BUILDERS, INC.



Principal Place of Business
**1805 ROYAL LANE S #103
DALLAS, TX 75229**

Mailing Address
**1805 ROYAL LANE S #103
DALLAS, TX 75229**

34007538



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

75-1414105

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

**SULLIVAN, MICHAEL J ESQ.
111 NORTH ORANGE AVENUE
SUITE 2050
ORLANDO, FL 32801**

7. Name and Address of New Registered Agent

Name

Tim Hawley

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

1714 Golfview Dr

City

Kissimmee

FL

Zip Code

34746

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, 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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> Delete
NAME	NOBLE, R. EDWARD	
STREET ADDRESS	10610 METRIC, #190	
CITY-ST-ZIP	DALLAS, TX	
TITLE	S	<input type="checkbox"/> Delete
NAME	NOBLE, KIM D	
STREET ADDRESS	10610 METRIC, #190	
CITY-ST-ZIP	DALLAS, TX	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	1805 Royal Ln #103
CITY-ST-ZIP	Dallas, TX 75229
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kim D Noble-Peters
STREET ADDRESS	1805 Royal Ln #103
CITY-ST-ZIP	Dallas, TX 75229
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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 exemption stated in Section 119.07(3)(i), 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: **R. Edward Noble** **R. EDWARD NOBLE** **1/30/04** **972-444-9300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #