

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000027550

1. Entity Name
SIMS BUILDERS, INC.



Principal Place of Business
11535 HIDDEN COVE CT
NEW PORT RICHEY, FL 34655 US

Mailing Address
11535 HIDDEN COVE CT
NEW PORT RICHEY, FL 34655 US



02252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3236170	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SIMS, LARRY
11535 HIDDEN COVE CT
NEW PORT RICHEY, FL 34655

**DO NOT WRITE
IN THIS SPACE**

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]

(NOTE: Registered Agent signature required when reinstating)

2-25-06

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1100000448891
03/09/06-80031-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SIMS, LARRY
STREET ADDRESS	11535 HIDDEN COVE CT
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-25-06

Date

727-859-4622

Daytime Phone #