

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90035 011 ***150.00

DOCUMENT # P94000040711

1. Entity Name
GOOD EARTH HOMES, INC.



Principal Place of Business
1294 TIMBERLANE RD
TALLAHASSEE, FL 32312 US

Mailing Address
1294 TIMBERLANE RD
TALLAHASSEE, FL 32312 US

2. Principal Place of Business
2296-3 Wednesday ST.
Suite, Apt. #, etc.

3. Mailing Address
2296-3 Wednesday ST.
Suite, Apt. #, etc.



04062004 Chg-P CR2E034 (10/03)

City & State
Tallahassee FL
Zip
32308
Country
USA

City & State
Tallahassee FL
Zip
32308
Country
USA

4. FEI Number
59-3246370
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GIBBS, HAROD
1294 TIMBERLANE RD
TALLAHASSEE, FL 32312

7. Name and Address of New Registered Agent

Name
Harold Gibbs
Street Address (P.O. Box Number is Not Acceptable)
2296-3 Wednesday ST.
City
Tallahassee FL Zip Code
32308

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/12/04
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
P
NAME
GIBBS, HAROLD F
STREET ADDRESS
1294 TIMBERLANE RD
CITY-ST-ZIP
TALLAHASSEE, FL ☐ Delete

TITLE
VP
NAME
GIBBS, NELL
STREET ADDRESS
1294 TIMBERLANE RD
CITY-ST-ZIP
TALLAHASSEE, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P
NAME
Harold F. Gibbs
STREET ADDRESS
2296-3 Wednesday ST.
CITY-ST-ZIP
Tallahassee FL 32308 ☒ Change ☐ Addition

TITLE
VP
NAME
Nell Gibbs
STREET ADDRESS
2296-3 Wednesday ST.
CITY-ST-ZIP
Tallahassee FL 32308 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/04
Date

Date

Daytime Phone #

(850)
893-9696