

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000089819	
1. Entity Name LA HOMES & DESIGN, INC.	
Principal Place of Business 6074 GULFPORT BLVD. GULFPORT, FL 33707 US	Mailing Address 6074 GULFPORT BLVD. GULFPORT, FL 33707 US



05042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3291182	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDREWS, LANCE
6074 GULFPORT
GULFPORT, FL 33707

**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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Elect on Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO ANDREWS, LANCE 6074 GULFPORT BLVD. GULFPORT, FL 33707
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**DO NOT WRITE
IN THIS SPACE**

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: *Lance Andrews* **LANCE ANDREWS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/4/05 **5/4/05** *727.345-1464*
Date Daytime Phone #