# **FILED** May 03, 2006 08:00 AM Secretary of State

#### 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

#### DOCUMENT # P95000056441

1. Entity Name WATERSIDE CUSTOM HOMES OF SOUTHWEST FLORIDA, INC.



Principal Place of Business

3013 DEL PRADO BOULEVARD SUITE 3

CAPE CORAL, FL 33904 US

Mailing Address

P 0 BOX 100834 CAPE CORAL, FL 33910

US



### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CR2E034 (11/05) 04282006 No Chg-P Applied For 4. FEI Number 65-0605084 Not Applicable

5. Certificate of Status Desired

5<u>-1-</u>06

(239)945-3300

Robert S. Zlobl

\$8.75 Additional Fee Required

ZLOBL, ROBERT S 3013 DEL PRADO BOULEVARD

SUITE 3

SIGNATURE:

## DO NOT WRITE IN THIS SDACE

CAPE CORAL, FL 33904			IN THIS SPACE		
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Find Trust Fund Contribution			icing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ZLOBL, ROBERT S 3013 DEL PRADO BOULEVARD, SUI CAPE CORAL, FL 33904	TE 3		-	U00000561980 05/19/06-80035-020 150.00
TITLE NAME STREET ACCRESS CITY-ST-ZIP					
TITLE NAME SIREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
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 attackment with an Address, with all other like empowered.					