


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 21, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000095590</b>					
1. Entity Name <b>SONOMA HILLS, INC.</b>					
Principal Place of Business <b>10400 COUNTY ROAD 48 HOWEY-IN-THE-HILLS FL 34737</b>			Mailing Address <b>10400 COUNTY ROAD 48 HOWEY-IN-THE-HILLS FL 34737</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-3427053</b>	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>BEUCHER, ROBERT N 10400 COUNTY ROAD 48 HOWEY-IN-THE-HILLS FL 34737</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEUCHER, ROBERT N		NAME		
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		CITY - ST - ZIP		
TITLE	DS	<input type="checkbox"/> Delete	TITLE	UN00000236261 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LINE, THOMAS P		NAME	02/21/05-80011-013 150.00	
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEUCHER, NICHOLAS F JR		NAME		
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEUCHER CLARK, MARGARET MARY		NAME		
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEUCHER PURSER, MICHELLE MARY		NAME		
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEUCHER LINE, DONNA		NAME		
STREET ADDRESS	10400 COUNTY ROAD 48		STREET ADDRESS		
CITY - ST - ZIP	HOWEY-IN-THE-HILLS FL 34737		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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-17-05 252-324-3101**

Date

Daytime Phone #