2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000023076

1. Entity Name
CUSTOM DESIGN HOMES, INC.

Principal Place of Business	Mailing Address
13655 TANGERINE BLVD. W. PALM BCH, FL 33412	13655 TANGERINE BLVD. W. PALM BCH, FL 33412

DO NOT WRITE IN THIS SPACE

03152005   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
65-0822838		Not Applicable

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

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6. Name and Address of Current Registered Agent

ARNOLD, ELISABETH
13655 TANGERINE BLVD.
W. PALM BCH, FL 33412

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

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ARNOLD, ELISABETH
STREET ADDRESS	13655 TANGERINE BLVD.
CITY-ST-ZIP	W. PALM BCH, FL 33412

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
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CITY-ST-ZIP	

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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: _Elisabeth Arnold_   3/15/05   (561) 795-2844
    SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #