

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90394 014 ***150.00

DOCUMENT # P99000027377

1. Entity Name

HOME BUILDERS SHOWCASE, INC.



Principal Place of Business

15125 HERONGLEN DRIVE
LITHIA FL 33547

Mailing Address

3155 BEAVER POND TRAIL
VALRICO FL 33594

*Please change address
to:*

2. Principal Place of Business

3. Mailing Address

6152 SKYLARK CREST DR

Suite, Apt. #, etc.

*6152 SKYLARKCREST DR
LITHIA FL 33547*

City & State

Lithia, FL

Zip

Country

Zip

Country

33547

USA

4. FEI Number

59-3582789

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLUMLEY, RONALD J
3155 BEAVER POND TRAIL
VALRICO FL 33594

Name *Plumley, Ronald J*

Street Address (P.O. Box Number is Not Acceptable)

15125 Heron Glen Drive

City

Lithia,

FL

Zip Code

33547

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. *change of address only.*

SIGNATURE

Ronald J Plumley

14 April 2004

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME PLUMLEY, RONALD J
STREET ADDRESS 3155 BEAVER POND TRAIL
CITY-ST-ZIP VALRICO FL 33594

TITLE PD ☒ Change ☐ Addition
NAME Plumley, Ronald J
STREET ADDRESS 15125 Heron Glen Drive
CITY-ST-ZIP Lithia, FL 33547

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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)(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:

Ronald J Plumley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 April 2004

Date

*813.651.
2700*

Daytime Phone #