2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# P99000090000

Entity Name: BILL NORMAN CUSTOM HOMES, INC.

Current Principal Place of Business:

326-B WEST BEARSS AVENUE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

326-B WEST BEARSS AVENUE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3603672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORMAN, WILLIAM
1103 AREVALO DE AVILA
TAMPA, FL 33613

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NORMAN, WM
Address: 1103 AREVALO DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: V ( ) Delete
Name: HEINDORF, ROB
Address: 15204 LEITH WALK LANE
City-St-Zip: TAMPA, FL 33618

Title: T ( ) Delete
Name: HEINDORF, TRACI
Address: 15204 LEITH WALK LANE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: NORMAN, LILI
Address: 1103 AREVALO DE AVILA
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILI NORMAN T 01/13/2004

Electronic Signature of Signing Officer or Director — Date