

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S12982

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA HOME VISIONS, INC.

**Current Principal Place of Business:**

4401 SE 15TH AVE  
CAPE CORAL, FL 33904 86

**New Principal Place of Business:**

4401 SE 15TH AVE  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

4401 SE 15TH AVE  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 65-0231268      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DALTON, DENNIS W.  
4401 SE 15TH AVE  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

DALTON, DENNIS W.  
920 CYPRESS LAKE CIR  
FT MYERS, FL 33912 US

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

03/15/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DALTON, DENNIS  
Address: 920 CYPRESS LAKE CIR  
City-St-Zip: FT MYERS, FL 33904

I hereby 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 all other like empowered.

SIGNATURE: DENNIS DALTON

PRES

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date