

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V02147

**FILED**  
**Apr 28, 2004**  
**Secretary of State**

**Entity Name:** H. GENE HARVEY HOMES, INC.

**Current Principal Place of Business:**

5103 SAN JUAN AVE.  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4343 CHARLESTON LANE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-3098711

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, C. HOLT, III  
233 EAST BAY STREET  
SUITE 930  
JACKSONVILLE, FL 32202 US

**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/D ( ) Delete  
Name: HARVEY, H. GENE,  
Address: 1514 STONEBRIAR RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S/D ( ) Delete  
Name: HARVEY, ANNIE E,  
Address: 1514 STONEBRIAR RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: HARVEY, H. GENE,  
Address: 4343 CHARLESTON LANE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S/D (X) Change ( ) Addition  
Name: HARVEY, ANNIE E,  
Address: 4343 CHARLESTON LANE  
City-St-Zip: JACKSONVILLE, FL 32210

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: HARVEY, H. GENE

PRES

04/28/2004

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

\_\_\_\_\_ Date