

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 29, 2007  
Secretary of State**

DOCUMENT# P01000046963

Entity Name: EXTRA MILE TEMPORARY HOUSING,INC.

**Current Principal Place of Business:**

8217 OLD PORT CIRCLE NORTH  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 16326  
JACKSONVILLE, FL 32245

**New Mailing Address:**

FEI Number: 59-3718125      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAGGERTY, JOHN T  
8217 OLD PORT CIRCLE NORTH  
JACKSONVILLE, FL 32216 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

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: HAGGERTY, JOHN T  
Address: 8217 OLD PORT CIRCLE NORTH  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

Title: CFO ( ) Change (X) Addition  
Name: KELPLER, NATALIA  
Address: 8217 OLD PORT CIRCLE N  
City-St-Zip: JACKSONVILLE, FL 32216 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN T. HAGGERTY

PRES

05/29/2007

Electronic Signature of Signing Officer or Director

Date