

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068631

FILED
Jul 19, 2007
Secretary of State

Entity Name: ANDERSON GROUP HOME, INC.

Current Principal Place of Business:

1414 GRANDALE STREET
LEHIGH ACRES, FL 33936

New Principal Place of Business:

400 N.E. 155 TERRACE
MIAMI, FL 33162 US

Current Mailing Address:

1414 GRANDALE STREET
LEHIGH ACRES, FL 33936

New Mailing Address:

400 N.E. 155 TERRACE
MIAMI, FL 33162 US

FEI Number: 20-4876551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, ORVILLE L
1414 GRANDALE STREET
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

ANDERSON, ORVILLE L
400 N.E. 155 TERRACE
MIAMI, FL 33162 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: ORVILLE L. ANDERSON

07/19/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ANDERSON, ORVILLE L
Address: 1414 GRANDALE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ANDERSON, ORVILLE L
Address: 400 N.E. 155 TERRACE
City-St-Zip: MIAMI, FL 33162 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: ORVILLE L. ANDERSON

PTSD

07/19/2007

Electronic Signature of Signing Officer or Director

Date