2007 FOR PROF!T CORPORATION ANNUAL REPORT

DOCUMENT # 185184

1. Entity Name

COMMUNITY BUILDERS ASSOCIATION, INC.



FILED Apr 26, 2007 08:00 Al Secretary of State

Principal Place of Business

1024 NW SIXTH STREET FORT LAUDERDALE, FL 33311 Mailing Address

RALEIGH R RAWLS 1024 NW 6TH STREET FORT LAUDERDALE, FL 33311



DO NOT WRITE IN THIS SPACE

04232007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0001519		Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RAWLS, RALEIGH R 1024 NW 6TH STREET FORT LAUDERDALE, FL 33311

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the ρ ions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000733270 05/09/07-80080-005 150.00		
10.	OFFICERS AND DIREC	CTORS					
NAME STREET ADDRESS CITY-ST-ZIP	PT RAWLS, RALEIGH R 1024 NW 6TH STREET FORT LAUDERDALE, FL 33311						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROACH, ERIC C 7502 FAIR OAKS AVENUE #1107 DALLAS, TX 75230						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROACH, HAROLD 804 LYNNFIELD DRIVE ARLINGTON, TX 76014			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1 ₆ 1 4 ₉			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information							

12. Thereby certally that the information supplied with this filling does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Baleigh R. Rawls.

4/24/07 954-467-7908