

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 365331

FILED
Mar 28, 2007
Secretary of State

Entity Name: COLLEGE WEST ESTATES, INC.

Current Principal Place of Business:

5318 LOWER BURNINGTOWN RD
FRANKLIN, NC 28734 US

New Principal Place of Business:

Current Mailing Address:

5318 LOWER BURNINGTOWN RD.
FRANKLIN, NC 28734 US

New Mailing Address:

FEI Number: 59-1307208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON FOLDS STEADHAM TOUKACH & WALKER PA
527 EAST UNIVERSITY AVE
GAINESVILLE, FL 32601 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: PD () Delete
Name: STEADHAM, J. M.
Address: 5318 LOWER BURNINGTOWN RD.
City-St-Zip: FRANKLIN, NC 28734

Title: VP,S () Delete
Name: STEADHAM, JULIE D
Address: 5318 LOWER BURNINGTOWN RD.
City-St-Zip: FRANKLIN, NC 28734

Title: VPT () Delete
Name: CRAIG, PATRICIA S
Address: 1904 NW 89TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

Title: VP () Delete
Name: CRAIG, EUGENE A
Address: 1904 NW 89TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: J. M. STEADHAM

PD

03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date