2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 464835

26 SEA ISLAND DRIVE

ORMOND BEACH, FL 32174

Address:

City-St-Zip:

Entity Name: BRATTLOF CLASSIC HOMES, INC

FILED Mar 06, 2006 Secretary of State

	iller Brown	-01 02/100101	1011120, 1140.					
Current Principal Place of Business:				New Principal Place of Business:				
7 FLORIDA	A PARK DRI\	/E						
PALM CO	AST, FL 321:	37 US						
Current Mailing Address:				New Mailing Address:				
P.O. BOX P O BOX 3 PALM CO		351429 US						
FEI Number	: 59-1557642	FEI Number A	Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desire	ed (X)	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
INDEPEN		(& AKEL, P.A. RE, SUITE 230 [.] 2202 US	I					
	named entity e of Florida.	submits this st	atement for the p	urpose of changing it	s registered	d office or registered agent	, or both,	
SIGNATU	RE:							
	Electro	onic Signature c	f Registered Age	nt		Date		
Election Car	mpaign Financi	ng Trust Fund Co	ntribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (THORNHILL, 4324 OLD A.I PALM COAST	.A. SOUTH		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	GARDNER, N 1004 S FLAG) Delete ANCY L LER AVENUE ACH, FL 32136		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name:	T (SIMPSON, BI) Delete RIAN M		Title: Name:	T THORNHILL	(X) Change ()Addition ,DARRYL L		

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.

Address:

City-St-Zip:

4324 OLD A1A SOUTH

PALM COAST, FL 32137

SIGNATURE: LESLIE B. THORNHILL PD 03/06/2006