

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 496703

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: SABAL HOMES OF FLORIDA, INC.

## Current Principal Place of Business:

915 OAKFIELD DR.  
SUITE- F  
BRANDON, FL 33511 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 951  
BRANDON, FL 33509 US

## New Mailing Address:

FEI Number: 59-1715583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEE, JAMES W  
3502 HOLLOW OAK PLACE  
BRANDON, FL 33511 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: LEE, JAMES W  
Address: 3502 HOLLOW OAK PLACE  
City-St-Zip: BRANDON, FL 33511 US

Title: VD ( ) Delete  
Name: LEE, WILLIAM D  
Address: 6006 HAMMOCK HILL AVE.  
City-St-Zip: LITHIA, FL 33547 US

Title: ST ( ) Delete  
Name: LEE, ANNA M  
Address: 3502 HOLLOW OAK PLACE  
City-St-Zip: BRANDON, FL 33511 US

Title: VD ( ) Delete  
Name: LEE, THOMAS A  
Address: 915 OAKFIELD DR., SUITE- F  
City-St-Zip: BRANDON, FL 33511 US

## 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: VD (X) Change ( ) Addition  
Name: LEE, THOMAS A  
Address: P.O. BOX 2743  
City-St-Zip: BRANDON, FL 33509 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: THOMAS A. LEE

VP

04/25/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date