


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 31, 2007 08:00 AM
Secretary of State**

DOCUMENT # 652523 1. Entity Name MC GREGOR HOMES, INC.		
Principal Place of Business 1515 POINCIANA AVENUE FT. MYERS, FL 33901 US		Mailing Address 1515 POINCIANA AVENUE FT. MYERS, FL 33901 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ROBERT KROUPA 1515 POINCIANA AVENUE FT. MYERS, FL 33901		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000611733 02/02/07-80075-007 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KROUPA, ROBERT L 1515 POINCIANA AVENUE FORT MYERS, FL 33901	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LEES, PATRICK A 1515 POINCIANA AVE. FORT MYERS, FL 33901	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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 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: <u>Patrick A. Lees</u> PATRICK A. LEES		Date: <u>1/23/07</u> Daytime Phone #: <u>239) 574-0000 Office</u> <u>239) 462-2681 Cell</u>