

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 20, 2009  
Secretary of State**

DOCUMENT# 769898

Entity Name: CARPENTER'S HOME ESTATES, INC.

**Current Principal Place of Business:**

1001 CARPENTER'S WAY  
LAKELAND, FL 33809 US

**New Principal Place of Business:**

**Current Mailing Address:**

1001 CARPENTER'S WAY  
LAKELAND, FL 33809 US

**New Mailing Address:**

FEI Number: 59-2347336      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMPSON, JOHN A EX. DIR  
1001 CARPENTERS WAY  
LAKELAND, FL 33809 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

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: MCCRANEY, LOU  
Address: 3105 BROOK DRIVE  
City-St-Zip: LAKELAND, FL 33811

Title: D (X) Delete  
Name: MILLER, JOHN  
Address: 3508 SYDNEY RD  
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete  
Name: SHORT, RILEY DR.  
Address: 221 WEST PALM  
City-St-Zip: LAKELAND, FL 33803

Title: D ( ) Delete  
Name: BREIDENBACH, LYNNE REV  
Address: 1543 U.S. HWY 98 S #205  
City-St-Zip: LAKELAND, FL 33801

Title: PD ( ) Delete  
Name: JOHNSON, MALLORY  
Address: 707 CARPENTER'S WAY #37  
City-St-Zip: LAKELAND, FL 33809

Title: TD ( ) Delete  
Name: GILLMAN, LEO  
Address: 1707 W. REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33567

**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:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MALLORY JOHNSON

PD

03/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date