## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 805846**

Entity Name: BEAZER EAST, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:			
ONE OXEC	RD CENTRE					
3000		110				
PHISBUR	G, PA 15219	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
300 E. JOHN CARPENTER FREEWAY IRVING, TX 75062 US						
FEI Number:	25-0904665	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1200 S. PIN	DRATION SYS IE ISLAND RC DN, FL 33324					
The above in the State		ubmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR	E:					
	Electroni	c Signature of Registered Ager	nt	Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MARKWELL, RO	CENTER SUITE 3000	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	BLUNDON, JILL	CENTRE, SUITE 3000	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	MANCE, KAREN	CENTER SUITE 3000	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	AS () HUTCHINSON, J 300 E. JOHN CA IRVING, TX 750	OHN M RPENTER FREEWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	GIARLA, WILLIA	CENTRE, SUITE 3000	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	STETZER, MAUI	CENTRE, SUITE 3000	Title: Name: Address: City-St-Zip:	AS (X) Change ( ) Addition KOPACH, DONNA L ONE OXFORD CENTRE, SUITE 3000 PITTSBURGH, PA 15219		

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: JOHN M. HUTCHINSON AS 04/28/2009