

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005516

Entity Name: FRANKLIN HOMES, INC. II

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

10655 HIGHWAY 43
RUSSELLVILLE, AL 35653

New Principal Place of Business:

Current Mailing Address:

10655 HIGHWAY 43
RUSSELLVILLE, AL 35653

New Mailing Address:

FEI Number: 63-0573970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOODY, JAMES
5189 BEACHWALK DRIVE
DESTIN, FL 32550 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JAMES, PETER
Address: 10655 HIGHWAY 43
City-St-Zip: RUSSELLVILLE, AL 35653

Title: V () Delete
Name: TAYLOR, JULIE
Address: 10655 HIGHWAY 43
City-St-Zip: RUSSELLVILLE, AL 35653

Title: ST () Delete
Name: BROWN, GWEN
Address: 10655 HIGHWAY 43
City-St-Zip: RUSSELLVILLE, AL 35653

Title: C () Delete
Name: JAMES, JERRY
Address: 10655 HIGHWAY 43
City-St-Zip: RUSSELLVILLE, AL 35653

Title: D () Delete
Name: COTTON, WAYNE
Address: 10655 HIGHWAY 43
City-St-Zip: RUSSELLVILLE, AL 35653

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:

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: PETER JAMES

PRES

06/25/2009

Electronic Signature of Signing Officer or Director

Date