

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007175

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: LOG CABIN HOMES LTD CORPORATION

**Current Principal Place of Business:**

1600 DOLGNER PLACE PORT OF SANFORD  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

PO DRAWER 1457  
ROCKY MOUNT, NC 27802

**New Mailing Address:**

FEI Number: 56-1565586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: VESCE, THOMAS J  
Address: 4552 AARON LANE  
City-St-Zip: ELM CITY, NC 27822

Title: VP ( ) Delete  
Name: BROOKS, JEFF  
Address: 1548 HARRISON ROAD  
City-St-Zip: NASHVILLE, NC 27856

Title: S ( ) Delete  
Name: AVERY, EUGENE  
Address: 1413 CRABAPPLE ROAD  
City-St-Zip: ROCKY MOUNT, NC 27801

Title: T ( ) Delete  
Name: JOYNER, DOROTHY  
Address: 11053 NC 97 WEST  
City-St-Zip: ROCKY MOUNT, NC 27801

**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:

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: DOROTHY JOYNER

T

04/02/2009

Electronic Signature of Signing Officer or Director

Date