

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007615

FILED
Jul 06, 2007
Secretary of State

Entity Name: MORRISON HOMES SERVICES, INC.

Current Principal Place of Business:

151 SOUTHALL LANE SUITE 200
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

151 SOUTHALL LANE SUITE 200
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-5853694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: CP () Delete
Name: PARKER, STEVE
Address: 1275 STUART RIDGE
City-St-Zip: ALPHARETTA, GA 30022

Title: VCT () Delete
Name: BAKUN, MAREK
Address: 13700 MAGNOLIA LAKE
City-St-Zip: FT MYERS, FL 33907

Title: DS () Delete
Name: HETZEL, JOHN
Address: 546 RIDGECREST RD
City-St-Zip: ATLANTA, GA 30307

Title: DVP () Delete
Name: OWEN, KATHY
Address: 1080 CREEK RIDGE POINTE
City-St-Zip: ALPHARETTA, GA 30005

Title: D () Delete
Name: STOREY, MIKE
Address: 4308 DUNCOMBE DR
City-St-Zip: VALRICO, FL 33594

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: MAREK BAKUN

VCT

07/06/2007

Electronic Signature of Signing Officer or Director

Date