2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005732

Entity Name: PLATEAU HOME BUILDERS, INC.

FILED Mar 17, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1782 WEST AVENUE3239 PEAVINE ROADCROSSVILLE, TN 38555CROSSVILLE, TN 38571

Current Mailing Address: New Mailing Address:

1485 SW BOUGAINVILLEA AVENUE PORT ST. LUCIE, FL 34953

FEI Number: 20-4632618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAWRENCE, JOHN D

1485 SW BOUGAINVILLEA AVENUE
PORT ST. LUCIE, FL 34953 US

LAWRENCE, JOHN D
7319 RESERVE CREEK DRIVE
PORT ST. LUCIE, FL 34986 US

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: DWIGHT W BELL 03/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition

Name: BELL, DWIGHT W

Address: BELL, DWIGHT W

Address: BELL, DWIGHT W

Address: BELL, DWIGHT W

Address: 1485 SW BOUGAINVILLEA AVENUE Address: 1835 N HIGHWAY A1A, UNIT 503
City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: INDIALANTIC, FL 32903

Title: VD () Delete Title: VP (X) Change () Addition Name: LAWRENCE, JOHN D Name: LAWRENCE, JOHN D

Address: 1485 SW BOUGAINVILLEA AVENUE Address: 7319 RESERVE CREEK DRIVE City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S () Delete Title: S (X) Change () Addition

Name: BROWN, CARMEN V Name: BROWN, CARMEN V

Address: 1485 SW BOUGAINVILLEA AVENUE Address: 1862 NE CRABTREE TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: JENSEN BEACH, FL 34957

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 D LAWRENCE VP 03/17/2009