2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000776

Title:

Name:

Address:

City-St-Zip:

FILED Mar 26, 2008 Secretary of State

Entity Na	me: ROTTLUN	D HOMES OF FLORIDA,	INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	CORMICK DRIVE ATER, FL 33759						
Current Mailing Address:			New Mail	New Mailing Address:			
	CORMICK DRIVE ATER, FL 33759						
FEI Number	: 65-0420728	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desir	ed (X)	
Name and	d Address of Cu	ırrent Registered Agent	: Name and	Name and Address of New Registered Agent:			
625 CÓUF	ARRY S ESQ RT STREET. SU ATER, FL 33756						
	e named entity so e of Florida.	ubmits this statement for t	he purpose of changing	its registered	office or registered agent	, or both,	
SIGNATU	RE:						
	Electronic	Signature of Registered	Agent	Date			
Election Ca	mpaign Financing	Trust Fund Contribution ().					
OFFICER	S AND DIRECT	ORS:	ADDITION	NS/CHANGES	TO OFFICERS AND DI	RECTORS:	
Title: Name: Address: City-St-Zip:	P () I WILLENBACHER 2637 MCCORMIC CLEARWATER,	CK DR	Title: Name: Address: City-St-Zip:	KAHN, STEVE	POINTE DRIVE N.		
Title: Name: Address: City-St-Zip:	VPS ()[ROTTER, DAVID 3065 CENTRE P ROSEVILLE, MN	OINTE DRIVE N.	Title: Name: Address: City-St-Zip:	ROTTER, DAV	POINTE DRIVE N.		
Title: Name: Address: City-St-Zip:	ROTTER, BERNA 3065 CENTRE P	OINTE DRIVE N.	Title: Name: Address: City-St-Zin:	SMITH, RAND 2637 MCCOR			

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN A. KAHN VP 03/26/2008

() Delete

() Change (X) Addition

LAUFENBERG, MARLA

2637 MCCORMICK DRIVE

CLEARWATER, FL 33759 FL