2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # F96000001912 Feb 07, 2007 08:00 A Secretary of State 1. Entity Namo PEACHTREE INTERIOR BUILDERS, LTD. INCORPORATED Principal Place of Business Mailing Address 2475 MEADOWBROOK PKWY 2475 MEADOWBROOK PKWY NW STE I NW STE I **DULUTH GA 30096** DULUTH GA 30096 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 58-1568377 Not Applicabl Žip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. 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. I am familiar with, and accept SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. IIILE Delete TITLE ☐ Change BURTON, JOHNNY NAME. NAME 2475 MEADOWBROOK PKWY N.W. STE I U00000626554 STREET ADDRESS STREET ADDRESS DULUTH GA 30096 CITY-ST-ZIP 02/15/07-80024-025 150.00 CITY-ST-ZIP BILL TITLE Change Addillor 🔲 ☐ Delete KITCHENS, CHRIS M NAME NAME 2475 MEADOWBROOK PKWY N.W. STE I STREET ADDRESS STREET ADDRESS DULUTH GA 30096 CITY-S1-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Additio BAILEY, ROBERT M JR NAME NAME 2475 MEADOWBROOK PKWY N.W. STE 1 STREET ADDRESS STREET ADDRESS DULUTH GA 30096 CITY-ST-ZIP CITY-ST-ZIP THIE ☐ Defete TITLE ☐ Change ☐ Addition KITCHENS, JENNY NAME NAME 2475 MEADOWBROOK PKWY N.W. STE I STREET ADDRESS STREET ADDRESS DULUTH GA 30096 CITY-ST-7IP CITY-ST-ZIP Addition THE ☐ Delcie TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental supplies and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or frusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: