

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G12953

FILED
Jan 08, 2009
Secretary of State

Entity Name: CLASSIC BUILDERS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

69 HEWETT PT RD
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

69 HEWETT PT RD
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-2259873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNYON, LYNN P
69 HEWETT PT. RD.
SANTA ROSA BEACH, FL 32459 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: D () Delete
Name: MUNYON, LYNN,
Address: 69 HEWETT PT RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MUNYON, LYNN,
Address: 69 HEWETT PT RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: V.P. () Change (X) Addition
Name: DEBRUHL, JOHN JEFFREY
Address: 100 ISLAND COVE COURT
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

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: LYNN P. MUNYON

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

Date