

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G92504

FILED
Feb 09, 2009
Secretary of State

Entity Name: MAJESTIC PARK HOMES, INC.

Current Principal Place of Business:

8300 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8300 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-2401106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLACHLAN, BRYAN K
7985-113TH STREET
SEMINOLE, FL 33775 US

Name and Address of New Registered Agent:

MCLACHLAN, BRYAN K
10823 70TH AVENUE NORTH
SEMINOLE, FL 33772 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:

02/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLANCHARD, HOWARD
Address: 8300 SEMINOLE BLVD #204
City-St-Zip: SEMINOLE, FL 33772

Title: S () Delete
Name: YOUNG, MARGARET
Address: 8300 SEMINOLE BLVD
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: PENNE, UNA M
Address: 8300 SEMINOLE BLVD #150
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: BOTTS, RAYMOND
Address: 8300 SEMINOLE BOULEVARD
City-St-Zip: SEMINOLE, FL 33772

Title: T () Delete
Name: WARWICK, MIRIAM
Address: 8300 SEMINOLE BLVD.
City-St-Zip: SEMINOLE, FL 33772

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: MIRIAM E WARWICK

TREA

02/09/2009

Electronic Signature of Signing Officer or Director

Date