2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H95903

Entity Name: ALLPROOF PRECISION HOMES, INC.

FILED Mar 19, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1490 NE PINE ISLAND ROAD 950 NORTH COLLIER BOULEVARD

BLDG 5E #301

CAPE CORAL, FL 33909 MARCO ISLAND, FL 34145

Current Mailing Address: New Mailing Address:

1490 NE PINE ISLAND ROAD 950 NORTH COLLIER BOULEVARD

BLDG 5E #301

CAPE CORAL, FL 33909 MARCO ISLAND, FL 34145

FEI Number: 59-2637238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

COLLINS, ANTHONY VERNON
1490 NE PINE ISLAND RD

BLDG 5

CAPE CORAL, FL 33909 US

COLLINS, ANTHONY VERNON
950 NORTH COLLIER BOULEVARD
#301
MARCO ISLAND, FL 34145 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: 03/19/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ALPERT, MERRICK Name: COLLINS, ANTHONY V

Address: 1490 NE PINE ISLAND ROAD BLDG 5E Address: 950 NORTH COLLIER BOULEVARD, #301

City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: MARCO ISLAND, FL 34145

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

 Name:
 COLLINS, ANTHONY V
 Name:

 Address:
 1490 NE PINE ISLAND ROAD BLDG 5E
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33909
 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: ANTHONY V. COLLINS PRES 03/19/2008