2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H97471

Entity Name: GROZA BUILDERS, INC.

FILED Apr 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

511 SW PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

511 SW PORT ST LUCIE BLVD PORT SAINT LUCIE, FL 34953 US

FEI Number: 59-2637154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GROZA, PATRICIA A. 1417 SW OSPREY COVE PT ST LUCIE, FL 34986 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: (X) Change () Addition GROZA, PATRICIA A., GROZA, PATRICIA A VP Name: Name: 1417 SW OSPREY COVE 1417 SW OSPREY COVE Address: Address: City-St-Zip: PT ST LUCIE, FL 34986 City-St-Zip: PT ST LUCIE, FL 34986 US

Title: DP () Delete Title: DP (X) Change () Addition
Name: GROZA JOHN A PRES

 Name:
 GROZA, JOHN A,
 Name:
 GROZA, JOHN A PRES

 Address:
 1417 SW OSPREY COVE
 Address:
 1417 SW OSPREY COVE

 City-St-Zip:
 PT ST LUCIE, FL 34986
 City-St-Zip:
 PT ST LUCIE, FL 34986 US

Title: S () Delete Title: S (X) Change () Addition Name: SZARY, NICOLIA C., Name: SZARY, NICOLIA C SEC

Address: 1326 SE BRIARWOOD DRIVE Address: 1326 SE BRIARWOOD DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: VΡ () Delete Title: VΡ (X) Change () Addition GROZA, JOHN ANTHONY GROZA, JOHN ANTHONY VP Name: Name: Address: 2074 SW CAPE ADOR ST Address: 2062 SW HAMPSHIRE LANE City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: PORT SAINT LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA A GROZA VP 04/10/2007