

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M70791

FILED
Apr 04, 2007
Secretary of State

Entity Name: DESOTO DEVELOPERS, INC.

Current Principal Place of Business:

P.O. BOX 1022
DUNDEE, FL 33838 US

New Principal Place of Business:

62 B MOORE RD
HAINES CITY, FL 33844 US

Current Mailing Address:

P.O. BOX 1022
DUNDEE, FL 33838 US

New Mailing Address:

FEI Number: 59-2893507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORNE, ANNIE L.
P.O. BOX 1022
DUNDEE, FL 33838 US

Name and Address of New Registered Agent:

HORNE, ANNIE L.
62 B MOORE RD
HAINES CITY, FL 33844 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: _____

04/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: HORNE, ANNIE L.,
Address: P.O. BOX 1022
City-St-Zip: DUNDEE, FL 33838

Title: D () Delete
Name: HORNE, KERMIT R.,
Address: P.O. BOX 1022
City-St-Zip: DUNDEE, FL 33838

Title: D () Delete
Name: HORNE, K. RAY,
Address: P.O. BOX 1022
City-St-Zip: DUNDEE, FL 33838

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:

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: ANNIE L. HORNE

P/D

04/04/2007

Electronic Signature of Signing Officer or Director

Date