

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M89429

FILED
Apr 30, 2008
Secretary of State

Entity Name: CUMBERLAND CUSTOM HOMES OF ORLANDO, INC.

Current Principal Place of Business:

% JOHN R. THOMAS
25 WINDSORMERE WAY SUITE 301
OVIEDO, FL 32765

Current Mailing Address:

% JOHN R. THOMAS
25 WINDSORMERE WAY SUITE 301
OVIEDO, FL 32765

New Principal Place of Business:

% JOHN R. THOMAS
1008 WEST PEBBLE BEACH CR
WINTER SPRINGS, FL 32708

New Mailing Address:

% JOHN R. THOMAS
P O BOX 621945
OVIEDO, FL 32762 19

FEI Number: 59-2900752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JOHN R.
25 WINDSORMERE WAY
SUITE 301
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

THOMAS, JOHN R.
1008 WEST PEBBLE BEACH CR
WINTER SPRINGS, FL 32762 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMAS, JOHN R.,
Address: 25 WINDSORMERE WAY SUITE 301
City-St-Zip: OVIEDO, FL 32765

Title: STV () Delete
Name: THOMAS, KARIN,
Address: 25 WINDSORMERE WAY SUITE 301
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: THOMAS, KARIN,
Address: 25 WINDSORMERE WAY SUITE 301
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THOMAS, JOHN R.,
Address: 1008 WEST PEBBLE BEACH CR
City-St-Zip: WINTER SPRINGS, FL 32762

Title: STV (X) Change () Addition
Name: THOMAS, KARIN,
Address: 1008 WEST PEBBLE BEACH CR
City-St-Zip: OVIEDO, FL 32708

Title: D (X) Change () Addition
Name: THOMAS, KARIN,
Address: 1008 WEST PEBBLE BEACH CR
City-St-Zip: WINTER SPRINGS, FL 32708

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: KARIN L THOMAS

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date