2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2008
Secretary of State

DOCUMENT# N06000001287

Entity Name: CORTE BRAVO HOLDINGS, INC.

Current Principal Place of Business:

141 NW ROBINWOOD DR
FORT WALTON BEACH, FL 32548 US

New Principal Place of Business:

FLORIDA PANHANDLE VETERANS HOME
101 NW KING STREET
FORT WALTON BEACH, FL 32548 US

Current Mailing Address:

141 NW ROBINWOOD DR
FORT WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 20-4263998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KNOLL, RAY
141 NW ROBINWOOD DR
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KNOLL, GORDON RAY
Address: 141 NW ROBINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: VD ( ) Delete
Name: AIKENS, LAURETTA B
Address: 141 NW ROBINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: STD ( ) Delete
Name: KNOLL, ELIZABETH P
Address: 141 NW ROBINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: D (X) Delete
Name: AIKENS, WILLIAM P
Address: 141 NW ROBINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32548 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: FPD (X) Change ( ) Addition
Name: KNOLL, GORDON RAY
Address: 141 NW ROBINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: VP (X) Change ( ) Addition
Name: AIKENS, LAURETTA B
Address: 2011 FLAMINGO LANE
City-St-Zip: NAVARRE, FL 325668358 US

Title: D (X) Change ( ) Addition
Name: AIKENS, WILLIAM P
Address: 2011 FLAMINGO LANE
City-St-Zip: NAVARRE, FL 325668358 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GORDON RAY KNOLL MR 03/16/2008

Electronic Signature of Signing Officer or Director — Date