2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# P01000082344

Entity Name: OWNER BUILDER ALLIANCES,INC

Current Principal Place of Business:

513 US #1
#206
NORTH PALM BCH, FL 33408

New Principal Place of Business:

3395 LAKE WORTH ROAD
SUITE #5
LAKE WORTH, FL 33461

Current Mailing Address:

513 US #1
#206
NORTH PALM BCH, FL 33408

New Mailing Address:

3395 LAKE WORTH ROAD
SUITE #5
LAKE WORTH, FL 33461

FEI Number: 65-0665266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBY, ED
513 US #1
#206
NORTH PALM BCH, FL 33408 US

Name and Address of New Registered Agent:

ROBY, ED
3395 LAKE WORTH ROAD
SUITE #5
LAKE WORTH, FL 33461 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: EDWARD ROBY 05/01/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROBY, ED
Address: 513 US 1 #206
City-St-Zip: NORTH PALM BCH, FL 33408

Title: V P ( ) Delete
Name: FANELLI, MICHAEL
Address: 3395 LAKE WORTH ROAD, STE #5
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VP ( ) Delete
Name: FANELLI, SUSAN
Address: 3395 LAKE WORTH ROAD, STE #5
City-St-Zip: LAKE WORTH, FL 33461 US

Title: S ( ) Delete
Name: YULE, JEANNE M
Address: 3395 LAKE WORTH ROAD, SUITE #5
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROBY, ED
Address: 3395 LAKE WORTH ROAD, SUITE #5
City-St-Zip: LAKE WORTH, FL 33461 US

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 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: JEANNE YULE S 05/01/2008
Electronic Signature of Signing Officer or Director Date