

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075440

FILED
Apr 27, 2007
Secretary of State

Entity Name: CARLEY HOMES OF THE TREASURE COAST, INC.

Current Principal Place of Business:

3081 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

New Principal Place of Business:

3091 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

Current Mailing Address:

3081 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

New Mailing Address:

3091 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

FEI Number: 51-0420814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STODDARD III, H. CLIFFORD
3081 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

FELDSTEEN, LEIGH N
3091 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 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: LEIGH N. FELDSTEEN

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STODDARD, III, H. CLIFFORD
Address: 3081 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990

Title: DS (X) Delete
Name: STODDARD, JOANNE A
Address: 3081 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: FELDSTEEN, LEIGH N
Address: 3091 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990

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: LEIGH N. FELDSTEEN

DPS

04/27/2007

Electronic Signature of Signing Officer or Director

Date