

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000112043

FILED
Nov 01, 2007
Secretary of State**Entity Name:** PHELPS BUILDERS GROUP, INC.**Current Principal Place of Business:**2629 WAVERLY BARN ROAD
STE. 133
DAVENPORT, FL 33897**New Principal Place of Business:****Current Mailing Address:**2629 WAVERLY BARN ROAD
STE. 133
DAVENPORT, FL 33897**New Mailing Address:****FEI Number:** 06-1660257**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PHELPS, THOMAS M SR
800 W CUMMINGS STREET
LAKE ALFRED, FL 33850 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: DPVS () Delete
Name: PHELPS, THOMAS M SR
Address: 800 W CUMMINGS STREET
City-St-Zip: LAKE ALFRED, FL 33850

Title: T () Delete
Name: PHELPS, THOMAS M SR
Address: 800 W. CUMMINGS STREET
City-St-Zip: LAKE ALFRED, FL 33850

Title: VP (X) Delete
Name: PHELPS, THOMAS M SR
Address: 800 W CUMMINGS STREET
City-St-Zip: LAKE AFLRED, FL 33850

Title: V (X) Delete
Name: MAHLER, MICHAEL J
Address: 221 OSCEOLA STREET
City-St-Zip: AUBURNDALE, FL 33823

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:

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: THOMAS M PHELPS SR

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11/01/2007

Electronic Signature of Signing Officer or Director

Date