

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000123383

Entity Name: O'CARROLL HOMES, INC.

FILED
Nov 02, 2009
Secretary of State**Current Principal Place of Business:**2001 HIGHWAY 19 NORTH
PALATKA, FL 32177**New Principal Place of Business:**1001 HWY. 19 N.
PALATKA, FL 32177**Current Mailing Address:**102 COMMERCIAL AVE
E PALATKA, FL 32131**New Mailing Address:**1001 HWY. 19 N.
PALATKA, FL 32177

FEI Number: 11-3669921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:WATSON, TODD ETAL
7785 BAYMEADOWS WAY STE 107
JACKSONVILLE, FL 32256 US**Name and Address of New Registered Agent:**WATSON, TODD ETAL
12276 SAN JOSE BOULEVARD
SUITE 721
JACKSONVILLE, FL 32223 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:

Electronic Signature of Registered Agent

11/02/2009

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: O'CARROLL, MAURICE
Address: 102 COMMERCIAL AVE
City-St-Zip: E PALATKA, FL 32131Title: D () Delete
Name: O'CARROLL, LINDA
Address: 102 COMMERCIAL AVE
City-St-Zip: E PALATKA, FL 32131Title: VP (X) Delete
Name: CARNES, TAMMI M
Address: 108 MICHENER AVE
City-St-Zip: SATSUMA, FL 32189**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DP (X) Change () Addition
Name: CARNES, TAMMI
Address: 1001 HWY. 19 N.
City-St-Zip: PALATKA, FL 32177Title: DST (X) Change () Addition
Name: MCKINNON, JESSIE
Address: 1001 HWY. 19 N.
City-St-Zip: PALATKA, FL 32177Title: () 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: TAMMI CARNES

Electronic Signature of Signing Officer or Director

DP

11/02/2009

Date