

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131827

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: ROBERTS'S GROUP HOME, INC.

**Current Principal Place of Business:**

3230 THAMES WAY  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

3230 THAMES WAY  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number: 02-0702880      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBERTS, LARRY  
3230 THAMES WAY  
MIRAMAR, FL 33025      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROBERTS, LARRY  
Address: 3230 THAMES WAY  
City-St-Zip: MIRAMAR, FL 33025

Title: VP ( ) Delete  
Name: ROBERTS, WINSOM  
Address: 3230 THAMES WAY  
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete  
Name: LARRY, ROBERTS JR  
Address: 3230 THAMES WAY  
City-St-Zip: MIRAMAR, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ROBERTS, WINSOME  
Address: 3230 THAMES WAY  
City-St-Zip: MIRAMAR, FL 33025

Title: D (X) Change ( ) Addition  
Name: LARRY, ROBERTS J JR  
Address: 3230 THAMES WAY  
City-St-Zip: MIRAMAR, FL 33025

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: LARRY ROBERTS

PD

04/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date