

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012303

FILED
Apr 19, 2007
Secretary of State

Entity Name: COUNTRY MILES ESTATES, INC.

Current Principal Place of Business:

19922 NW COUNTY RD 275
ALTHA, FL 32421

New Principal Place of Business:

2754 BARBER RD
COTTONDALE, FL 32431

Current Mailing Address:

12141 PCB PARKWAY
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 38-3671478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, FRANK A
4431 LAFAYETTE STREET
MARIANNA, FL 32446 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: DVST () Delete
Name: BYERS, MICHAEL C
Address: P.O. BOX 28433
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: DP () Delete
Name: MILES, WILLIAM G
Address: 19922 NW COUNTY ROAD 275
City-St-Zip: ALTHA, FL 32421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: MILES, WILLIAM G
Address: 2745 BARBER RD
City-St-Zip: COTTONDALE, FL 32431

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL C. BYERS

DVST

04/19/2007

Electronic Signature of Signing Officer or Director

Date