## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000117289

305 WOOD TRAIL

PANAMA CITY, FL 32405

Address: City-St-Zip:

FILED Apr 28, 2008 Secretary of State

Entity Na	me: DAVID L	ABARRE HOME BUILDER, IN	NC.		
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	JLF AVENUE CITY, FL 324	05			
Current Mailing Address:			New Mailing Address:		
	JLF AVENUE CITY, FL 324	05			
FEI Number	: 20-0398633	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LA BARRE, DAVID S 305 WOOD TRAIL PANAMA CITY, FL 32405 US			LABARRE, DAVID S 305 WOOD TRAIL PANAMA CITY, FL 324		
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE: DAVID S LABARRE				04/28/2008	
	Electro	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( LABARRE, DA 305 WOOD TF PANAMA CITY	RAIL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP ( LABARRE, CY 305 WOOD TF PANAMA CITY	RAIL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	T ( LABARRE, DA	) Delete VID S	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DAVID S LABARRE Ρ 04/28/2008