

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128793

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: WAUGH CUSTOM HOMES, INC.

## Current Principal Place of Business:

2166D HWY 30A  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

4241 SHADOW LANE  
NICEVILLE, FL 32578

## Current Mailing Address:

PO BOX 5186  
NICEVILLE, FL 32578

## New Mailing Address:

FEI Number: 20-0361142      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALL FLORIDA FIRM, INC  
813 DELTONA BLVD  
SUITE A  
DELTONA, FL 32725 US

## Name and Address of New Registered Agent:

MARGIE WAUGH  
4241 SHADOW LANE  
NICEVILLE, FL 32578      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: MARGIE WAUGH

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WAUGH, FRANK E  
Address: 4241 SHADOW LN  
City-St-Zip: NICEVILLE, FL 32578

Title: S ( ) Delete  
Name: WAUGH, MARGIE  
Address: 4241 SHADOW LN  
City-St-Zip: NICEVILLE, FL 32578

Title: VP (X) Delete  
Name: COTTERMAN, JOSHUA R  
Address: 1548 MEADOWBROOK CT  
City-St-Zip: NICEVILLE, FL 32578

## 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:

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: FRANK E WAUGH

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date