

2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90021 003 ***158.75

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02122007 Chg-P CR2E034 (12/06)

DOCUMENT # P03000135458					
1. Entity Name BUTLER BUILDERS INC.					
Principal Place of Business 2490 44TH AVE VERO BEACH, FL 32966 US <i>182 Abeto Terrace</i> <i>SEBASTIAN FLA 32958</i>			Mailing Address PO BOX 233 VERO BEACH, FL 32961 US		
2. Principal Place of Business - No P.O. Box # 182 Abeto Terrace		3. Mailing Address PO BOX 233			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Sebastian FLA		City & State Vero Bch. FL.		4. FEI Number 81-0637433	
Zip 32958		Country U.S.A.		Applied For <input type="checkbox"/> Not Applicable	
Zip 32961		Country U.S.A.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUTLER, BONNIE J 2490 44TH AVE VERO BEACH, FL 32966 <i>182 Abeto Terrace</i> <i>SEBASTIAN, FL 32958</i>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE <input type="checkbox"/> Delete NAME BUTLER, SAMUEL D STREET ADDRESS 2490 44TH AVE CITY-ST-ZIP VERO BEACH, FL 32966 <i>182 Abeto Terrace</i> <i>SEBASTIAN, FL 32958</i>			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME BUTLER, JOHN A STREET ADDRESS 1620 6TH AVE CITY-ST-ZIP VERO BEACH, FL 32960 <i>182 Abeto Terrace</i> <i>SEBASTIAN, FL 32958</i>			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **2/13/06** **772 589-2627**
Signature and typed or printed name of signing officer or director Date Daytime Phone #