

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138880

Entity Name: BARONY HOMES INC.

FILED
Jan 18, 2008
Secretary of State

Current Principal Place of Business:

1407 VISCAYA PKWY
SUITE 1
CAPE CORAL, FL 33990

New Principal Place of Business:

4720 SE 15TH AVE.
SUITE 219
CAPE CORAL, FL 33904

Current Mailing Address:

714 NW 36TH PLACE
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: 43-2036613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONNELLY, MICHAEL A
714 NW 36TH PLACE
CAPE CORAL, FL 33993 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: DONNELLY, MICHAEL A
Address: 714 NW 36TH PL
City-St-Zip: CAPE CORAL, FL 33993

Title: VP () Delete
Name: DONNELLY, MICHAEL A
Address: 714 NW 36TH PL
City-St-Zip: CAPE CORAL, FL 33993

Title: SEC () Delete
Name: DONNELLY, MICHAEL A
Address: 714 NW 36TH PL
City-St-Zip: CAPE CORAL, FL 33993

Title: TR () Delete
Name: DONNELLY, MICHAEL A
Address: 714 NW 36TH PL
City-St-Zip: CAPE CORAL, FL 33993

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:

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: MICHAEL A. DONNELLY

PRES

01/18/2008

Electronic Signature of Signing Officer or Director

_____ Date