

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148482

FILED  
Jun 09, 2009  
Secretary of State

Entity Name: NATIVE HOMES MANAGEMENT, INC.

## Current Principal Place of Business:

3020 EMERSON DR SE  
PALM BAY, FL 32909 US

## New Principal Place of Business:

2560 EMERSON DR SE  
PALM BAY, FL 32909 US

## Current Mailing Address:

3020 EMERSON DR SE  
PALM BAY, FL 32909 US

## New Mailing Address:

2560 EMERSON DR SE  
PALM BAY, FL 32909 US

FEI Number: 20-0506196

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIRST, WILLIAM  
3020 EMERSON DR SE  
PALM BAY, FL 32909 US

## Name and Address of New Registered Agent:

KIRST, WILLIAM  
2560 EMERSON DR SE  
PALM BAY, FL 32909 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:

06/09/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: KIRST, WILLIAM  
Address: 3020 EMERSON DR SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: 1VP ( ) Delete  
Name: POHLMAN, JEFF  
Address: 1255 ROLLINGROCK DR  
City-St-Zip: HOSFORD, FL 32334

Title: 2VP ( ) Delete  
Name: LENO, LOUIS A  
Address: 1866 BELCOURT  
City-St-Zip: INDIALANTIC, FL 32903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: BRANCH, RICK  
Address: 2560 EMERSON DR SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: DIR (X) Change ( ) Addition  
Name: PERRY, ANDREW  
Address: 2560 EMERSON DRIVE SE  
City-St-Zip: PALM BAY, FL 32909

Title: VPD (X) Change ( ) Addition  
Name: DANKERT, DENNIS  
Address: 2560 EMERSON DRIVESE  
City-St-Zip: PALM BAY, FL 32909

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: DENNIS DANKERT

VPD

06/09/2009

Electronic Signature of Signing Officer or Director

Date