


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90042 003 ***150.00

DOCUMENT # P03134 1. Entity Name LOWDER NEW HOMES, INC.					
Principal Place of Business 2000 INTERSTATE PARK DR. SUITE 400 MONTGOMERY, AL 36109			Mailing Address 2000 INTERSTATE PARK DR. SUITE 400 MONTGOMERY, AL 36109		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		01102008 Chg-P CR2E034 (12/06)	
4. FEI Number 63-0383548				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			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 reissuing) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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 NAME STREET ADDRESS CITY - ST - ZIP	COBD LOWDER, JAMES K. 2000 INTERSTATE PARK DR SUITE 400 MONTGOMERY, AL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LOWDER, THOMAS H. 2101 6TH AVENUE NORTH STE 750 BIRMINGHAM, AL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FARRIOR, ALAN S 2000 INTERSTATE PK STE 300 MONTGOMERY, AL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AST TUCKER, BRYAN K 2000 INTERSTATE PARK DR SUITE 400 MONTGOMERY, AL 36109	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MCLEOD, P L JR 2000 INTERSTATE PARK DR SUITE 400 MONTGOMERY, AL 36109	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SALIBA, CHARLES S 2000 INTERSTATE PARK DR SUITE 300 MONTGOMERY, AL 36109	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT JAMES W. RUTLAND, IV 2000 INTERSTATE PARK DR. STE 300 MONTGOMERY, AL 36109	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
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 officers empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4-17-08		334-270-0638	