

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051587

Entity Name: FLORIDIAN GULF COAST HOMES, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

26530 MALLARD WAY
PUNTA GORDA, FL 33950

New Principal Place of Business:

1433 THISTLEDOWN WAY
FT MYERS, FL 33901

Current Mailing Address:

26530 MALLARD WAY
PUNTA GORDA, FL 33950

New Mailing Address:

PO BOX 60524
FT MYERS, FL 33906

FEI Number: 20-0927164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSEY, DEAN D
26530 MALLARD WAY
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

OBEN, JOAN T
1433 THISTLEDOWN WAY
FT MYERS, FL 33901 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: JOAN T. OBEN

05/01/2008

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: PD () Delete
Name: OBEN, SR, GARY W
Address: 26530 MALLARD WAY
City-St-Zip: PUNTA GORDA, FL 33950

Title: VSTD (X) Delete
Name: ROSSEY, SR, DEAN D
Address: 26530 MALLARD WAY
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OBEN, SR, GARY W
Address: PO BOX 60524
City-St-Zip: FT MYERS, FL 33906

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: GARY W. OBEN, SR.

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date