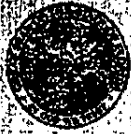


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # P04000066467		
1. Entity Name SIMMONS HOMEBUILDERS OF N.W. FLORIDA, INC.		

Principal Place of Business 309 CO HWY 83 A FREEPORT, FL 32439 US	Mailing Address 309 CO HWY 83 A FREEPORT, FL 32439 US
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DO NOT WRITE IN THIS SPACE

042023071 No Cag-P CR2E084 (11/05)

4. FEL Number 20-1341571	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SIMMONS, CHARLIE 309 CO HWY 83A FREEPORT, FL 32439
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**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature Required when releasing)

DATE

**FILE NUMBER FEE IS \$185.00
After May 1, 2007 Fee will be \$559.00**9. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees****10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. SIMMONS, CHARLIE 309 CO HWY 83 A FREEPORT, FL 32439
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**U000000755044
05/22/07-80085-022 150.00

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/07