

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000090063			
1. Entity Name SOUTHERN BREEZE HOMES AND DEVELOPMENT, INC.			
Principal Place of Business 3057 SW SAVONA BLVD PORT ST LUCE, FL 34953		Mailing Address 5447 CENTER STREET JUPITER, FL 33458	
2. Principal Place of Business - No P.O. Box # 14801 WEST ANGLE ROAD. Suite, Apt. #, etc. FT. PIERCE, FL. City & State		3. Mailing Address SAME Suite, Apt. #, etc. 14801 WEST ANGLE RD. City & State FT. PIERCE, FL. Zip 34945 Country USA	
4. FEI Number 20-1247370		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		05192007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent PHILLIPS, TERRY 5447 CENTER ST JUPITER, FL 33458		7. Name and Address of New Registered Agent Name FRANK GAUTHIER Street Address (P.O. Box Number is Not Acceptable) 14801 WEST ANGLE ROAD WEST ANGLE ROAD City FT. PIERCE FL Zip Code 34945	
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 DATE 5/30/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
Amended AR is \$61.25		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 DP DUPILKA, GREG 5447 CENTER STREET JUPITER, FL 33458	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DP FRANK J. GAUTHIER 14801 WEST ANGLE ROAD FT. PIERCE, FL. 34945	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP T GATHERIER, FRANK 1517 SW FORTUNE RD PORT ST LUCE, FL 34952	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 400105642984 07/06/07--01055--017 **\$61.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP BLUE, HARRY 4601 WILD TURKEY LN OKEECHOBEE, FL 34974	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP S PHILLIPS, TERRY 5447 CENTER STREET JUPITER, FL 33458	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP S FRANK J GAUTHIER 14801 WEST ANGLE RD. FT. PIERCE, FL. 34945	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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 like empowered.			
SIGNATURE:		Date 5/30/07 Daytime Phone # 772-370-3096	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

FILED
07 JUL -2 AM 9:18
CLERK OF STATE
TALLAHASSEE, FLORIDA

