## 2008 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** Mar 06, 2008 08:00 A Secretary of State DOCUMENT # P04000143638 PRESTON'S BUILDERS, INCORPORATED Mailing Address Principal Place of Business 5774 US HIGHWAY 1 NORTH P.O. BOX 2149 ST AUGUSTINE, FL 32085 ST AUGUSTINE, FL 32085-2149 US 02262008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0732326 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARTLETT, PRESTON DO NOT WRITE P.O. BOX 2149 ST AUGUSTINE, FL 32085-2149 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BARTLETT, PRESTON NAME STREET ADDRESS P.O. BOX 2149 ST AUGUSTINE, FL 320952149 CITY-SY-ZIP TITLE *U00000849462* NAME 03/21/08-80022-005 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

STREET ADDRESS CITY-ST-7IP

1-3-08 /904-669-5841