

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000001015

Entity Name: FLORIDA NATIONAL BUILDERS, INC.

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

P. O. BOX 979
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 979
MIMS, FL 32754

New Mailing Address:

FEI Number: 20-2097718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SERGE, PATRICK M
4122 MAU MAU LANE
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

SERGE, PATRICK M
350 N WASHINGTON AVENUE
SUITE N
TITUSVILLE, FL 32796 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: MICHAEL P. COOP SR

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: COOP, MICHAEL P SR
Address: 4526 WELLINGTON LANE
City-St-Zip: MIMS, FL 32754

Title: DVPS () Delete
Name: SERGE, PATRICK M
Address: 4122 MAU MAU LANE
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: COOP, MICHAEL P SR
Address: 4530 WELLINGTON LANE
City-St-Zip: MIMS, FL 32754

Title: SEC (X) Change () Addition
Name: SERGE, PATRICK M
Address: 350 N WASHINGTON AVENUE STE N
City-St-Zip: TITUSVILLE, FL 32796

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL P COOP SR

DPT

04/10/2007

Electronic Signature of Signing Officer or Director

Date