


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90048 020 ***150.00

DOCUMENT # P05000014894	
1. Entity Name PENNOCK BUILDERS, INC.	

Principal Place of Business P.O. BOX 30014 PENSACOLA, FL 32503	Mailing Address P.O. BOX 30014 PENSACOLA, FL 32503
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2. Principal Place of Business - No P.O. Box # 10379 O'DANIEL DRIVE	3. Mailing Address 10379 O'DANIEL DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State PENSACOLA, FL	City & State PENSACOLA, FL
Zip 32514	Zip 32514
Country	Country

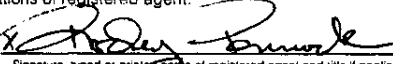


03282007 Chg-P CR2E034 (12/06)

4. FEI Number 20-2192446	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PENNOCK, RODNEY G 811 BEVERLY PARKWAY PENSACOLA, FL 32503	7. Name and Address of New Registered Agent Name PENNOCK, RODNEY G Street Address (P.O. Box Number is Not Acceptable) 10379 O'DANIEL DRIVE City PENSACOLA FL 32514
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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.

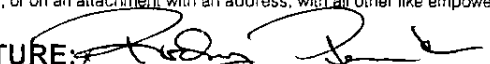
SIGNATURE  DATE **5/1/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PENNOCK, RODNEY G <input type="checkbox"/> Delete P.O. BOX 30014 PENSACOLA, FL 32503	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PENNOCK, RODNEY G <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10379 O'DANIEL DRIVE PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PENNOCK, DAVID R <input type="checkbox"/> Delete P.O. BOX 30014 PENSACOLA, FL 32503	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PENNOCK, DAVID R <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 914 DEEDRA AVE PENSACOLA, FL 32514
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
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 **5/1/07** (350) **324-7864**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR