2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104075

GRIFFIN, JANÉT

FERNANDINA BEACH, FL 32034

608 S 8TH ST

Name:

Address:

City-St-Zip:

Entity Name: BUILT SMART BUILDERS INC

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
608 S 8TH ST PO BOX 16718 FERNANDINA BEACH, FL 32034			608 S 8TH ST FERNANDINA BEA	608 S 8TH ST FERNANDINA BEACH, FL 32034	
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
405 S 8TH ST PO BOX 16718 FERNANDINA BEACH, FL 32035			608 S 8TH ST FERNANDINA BEACH, FL 32034		
FEI Number	: 43-2086314	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
FERNAND The above	SHORE DR DINA BEACH, FL		ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			ent	 Date	
Election Ca	mpaign Financing 1	Frust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () D GRIFFIN, PHILIP 608 S 8TH ST FERNANDINA BE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () D GARRETT, CHAR 608 S 8TH ST FERNANDINA BE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D GARRETT, CATHI 608 S 8TH ST FERNANDINA BE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()D	Pelete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JANET GRIFFIN T 03/02/2007