

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
May 15, 2007
Secretary of State**

DOCUMENT# P05000144841

Entity Name: GRAND DESIGNS, INC.

Current Principal Place of Business:

1701 TENNESSEE AVE
SUITE 200
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

1701 TENNESSEE AVE
SUITE 200
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 20-3691931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILLMAN, JEFF
1701 TENNESSEE AVE
SUITE 200
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TILLMAN, JEFF
Address: 1701 TENNESSEE AVE STE 200
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: WOLFROTH, AMY
Address: 1701 TENNESSEE AVE STE 200
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TILLMAN, JEFF
Address: 1701 TENNESSEE AVE STE 200
City-St-Zip: LYNN HAVEN, FL 32444

Title: S (X) Change () Addition
Name: WOLFROTH, AMY
Address: 1701 TENNESSEE AVE STE 200
City-St-Zip: LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify 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: JEFF TILLMAN

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05/15/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date