

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084176

Entity Name: E. J. ALLEN GROUP HOMES, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

2230 NW 8TH TERRACE
CAPE CORAL, FL 33993

New Principal Place of Business:

Current Mailing Address:

2230 NW 8TH TERRACE
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: 01-0871148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, EDGER J
2009 CANTON AVE
ALVA, FL, FL 33920 US

Name and Address of New Registered Agent:

ALLEN, EDGER J
2909 NE 5TH AVE
CAPE CORAL, FL 33909 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, EDGER J
Address: 2009 CANTON AVE
City-St-Zip: ALVA, FL 33920

Title: VST () Delete
Name: HENRY, ROSEMARIE
Address: 2909 N. E. 5TH AVENUE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, EDGER J
Address: 2909 NE 5TH AVE
City-St-Zip: CAPE CORAL, FL 33909

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDGAR ALLEN

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date