

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000130247

FILED  
Mar 30, 2007  
Secretary of State

Entity Name: COLOSSAL CUSTOM HOMES CORP.

## Current Principal Place of Business:

54 LANGDON DR.  
PALM COAST, FL 32137 US

## New Principal Place of Business:

## Current Mailing Address:

54 LANGDON DR.  
PALM COAST, FL 32137 US

## New Mailing Address:

FEI Number: 20-5706414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EMPLIT, CHRIS  
54 LANGDON DR.  
PALM COAST, FL 32137 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: EMLIT, CHRIS  
Address: 54 LANGDON DR.  
City-St-Zip: PALM COAST, FL 32137 US

Title: D ( ) Delete  
Name: EMLIT, CHRIS  
Address: 54 LANGDON DR.  
City-St-Zip: PALM COAST, FL 32137 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: EMLIT, CHRIS B  
Address: 54 LANGDON DR.  
City-St-Zip: PALM COAST, FL 32137 US

Title: VP (X) Change ( ) Addition  
Name: NORWOOD, MICHEAL S MR  
Address: 30 DUNSON ESTATE RD  
City-St-Zip: BUNNELL, FL 32137 US

Title: TRES ( ) Change (X) Addition  
Name: ZERBE, PAUL W MR  
Address: 2468 N OCEANSHORE BLVD  
City-St-Zip: FLAGLER BEACH, FL 32136 US

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: CHRIS EMLIT

PRES

03/30/2007

Electronic Signature of Signing Officer or Director

Date