

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154065

FILED
Apr 29, 2008
Secretary of State

Entity Name: MOBILE HOME TRANSITIONS INC.

Current Principal Place of Business:

8003 SEMINOLE BLVD.
15
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

8003 SEMINOLE BLVD.
15
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, LACIE A
8003 SEMINOLE BLVD.
15
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

COESTER CONSTRUCTION INC
8003 SEMINOLE BLVD.
15
SEMINOLE, FL 33772 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: LACIE A CARTER

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P. () Delete
Name: CARTER, LACIE A
Address: 8003 SEMINOLE BLVD. #15
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP. () Delete
Name: CARTER, LARRY E SR.
Address: 8003 SEMINOLE BLVD. #15
City-St-Zip: SEMINOLE, FL 33772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LACIE A CARTER

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date