## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P07000066806

Entity Name: FREEDOM HOMEBUILDERS, INC.

FILED Aug 28, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

718 SW PORT ST. LUCIE BLVD. 2001 NE STEVEN AVENUE 8 JENSEN BEACH, FL 34957

PORT SAINT LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

718 SW PORT ST. LUCIE BLVD. 2001 NE STEVEN AVENUE JENSEN BEACH, FL 34957

PORT SAINT LUCIE, FL 34953

FEI Number: 41-2247315 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOORE, ALBERT B
718 SW PORT ST. LUCIE BLVD
PORT SAINT LUCIE, FL 34953 US
JONES, MARY G
2001 NE STEVEN AVENUE
JENSEN BEACH, FL 34957 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: MARY G. JONES 08/28/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: MOORE, ALBERT B Name: JONES, WILLIAM B
Address: 718 SW PORT ST. LUCIE BLVD. STE. 8 Address: 2001 NE STEVEN AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: BRUHN, JOHN D Name: JONES, MARY G
Address: 718 SW PORT ST. LUCIE BLVD. STE. 8 Address: 2001 NE STEVEN AVENUE

City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: JENSEN BEACH, FL 34957

Name:JONES, WILLIAM BName:JONES, WILLIAM DAddress:718 SW PORT ST. LUCIE BLVD., STE. 8Address:2001 NE STEVEN AVENUECity-St-Zip:PORT SAINT LUCIE, FL 34953City-St-Zip:JENSEN BEACH, FL 34957

Title: D () Delete Title: D (X) Change () Addition

Name:CORE, ANTHONY LName:HERIOT, DAVIDAddress:718 SW PORT ST. LUCIE BLVD, STE. 8Address:2001 NE STEVEN AVENUECity-St-Zip:PORT SAINT LUCIE, FL 34953City-St-Zip:JENSEN BEACH, FL 34957

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: WILLIAM B. JONES D 08/28/2008