2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093117

FILED Apr 30, 2008 Secretary of State

Entity Name: B & B HOME IMPROVEMENT OF NORTH FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
3735 ALCOVE DRIVE MIDDLEBURG, FL 32068-385 US			2871 CREEK STREET MIDDLEBURG, FL 32068-385 US	
VIIDDEED	ONO, 1 E 3200	0-303 00	MIDDLEBONO, I E	32000-303 00
Current N	Aailing Addres	s:	New Mailing Addre	ess:
3735 ALCOVE DRIVE MIDDLEBURG, FL 32068-385 US		2871 CREEK STREET MIDDLEBURG, FL 32068-385 US		
El Number	r: 26-0768715	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:
	AN OVE DRIVE URG, FL 3206	8-385 US		
	e named entity : te of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,
	te of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,
n the Stat	te of Florida. IRE:	submits this statement for the nic Signature of Registered Ag		ered office or registered agent, or both, Date
n the Stat SIGNATU	te of Florida. ÉIRE: Electror			
n the Stat SIGNATU Election Ca	te of Florida. ÉIRE: Electror	nic Signature of Registered Ac	gent	
n the Stat BIGNATU Election Ca DFFICER Title: lame: kddress:	te of Florida. IRE: Electror Impaign Financing IS AND DIREC PD DOE, BRIAN 3735 ALCOVE	nic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete	gent	Date
n the Stat SIGNATU Election Ca	te of Florida. RE: Electror Impaign Financing S AND DIREC PD () DOE, BRIAN 3735 ALCOVE MIDDLEBURG, VSTD () FREEMAN, BRI 3735 ALCOVE	nic Signature of Registered Acg Trust Fund Contribution (). TORS: Delete DRIVE FL 320683857 US Delete ANDI	gent ADDITIONS/CHAN Title: Name: Address:	Date

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: BRIAN DOE P 04/30/2008