

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000030496

FILED
Oct 23, 2008
Secretary of State**Entity Name:** MIDWEST HOME BUILDERS, INC.**Current Principal Place of Business:**54 NW 6 AVE
BOCA RATON, FL 33432 US**New Principal Place of Business:****Current Mailing Address:**54 NW 6 AVE
BOCA RATON, FL 33432 US**New Mailing Address:****FEI Number:** 65-0407347**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVIDSON, ROBERT
54 NW 6 AVE
BOCA RATON, FL 33432 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**OFFICERS AND DIRECTORS:**

Title: PSTC () Delete
Name: DAVIDSON, ROBERT J
Address: 54 N.W. 6TH AVENUE
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: DAVIDSON, ROBERT J
Address: 54 N.W. 6TH AVENUE
City-St-Zip: BOCA RATON, FL

Title: D/ O () Delete
Name: DAVIDSON, PHILIP R VICE-P
Address: 54 N.W. 6 AV
City-St-Zip: BOCA RATON, FL 33432

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D/O () Change (X) Addition
Name: DAVIDSON, STUART E VPRES
Address: 54 NW 6 AVE
City-St-Zip: BCA RARON, FL 33432

Title: D/O () Change (X) Addition
Name: DAVIDSON, GARRETT J VPRES
Address: 54 N W 6 AVE.
City-St-Zip: BOCA RATON, FL 33432

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: ROBERT J DAVIDSON

PRES

10/23/2008

Electronic Signature of Signing Officer or Director_____
Date