

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000005793

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: HARMONY HOMES OF NORTH FLORIDA, INC.

## Current Principal Place of Business:

6101 GAZEBO PARK PLACE N  
STE 107  
JACKSONVILLE, FL 32257 US

## New Principal Place of Business:

426 ORANGE BLUFF AVE  
JACKSONVILLE, FL 32211 US

## Current Mailing Address:

6101 GAZEBO PARK PLACE N  
STE 107  
JACKSONVILLE, FL 32257 US

## New Mailing Address:

426 ORANGE BLUFF AVE  
JACKSONVILLE, FL 32211 US

FEI Number: 59-3220902

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHACTER, DAVID A  
6101 GAZEBO PARK PLACE  
STE 107  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

SHACTER, DAVID A  
426 ORANGE BLUFF AVE  
JACKSONVILLE, FL 32211 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: DAVID A SHACTER

04/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: SHACTER, DAVID A  
Address: 6101 GAZEBO PARK PLACE N STE 107  
City-St-Zip: JACKSONVILLE, FL 32207

Title: V ( ) Delete  
Name: SHACTER, MELODY  
Address: 426 ORANGE BLUFF AVE  
City-St-Zip: JACKSONVILLE, FL 32211

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: SHACTER, DAVID A  
Address: 426 ORANGE BLUFF AVE  
City-St-Zip: JACKSONVILLE, FL 32211

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: DAVID A SHACTER

DPST

04/15/2008

Electronic Signature of Signing Officer or Director

Date