

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000055644

Entity Name: MALASKY HOMES, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

1300 N. FLORIDA MANGO ROAD
SUITE 15
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1300 N. FLORIDA MANGO ROAD
SUITE 15
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0507550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALASKY, BRUCE A
1300 N. FLORIDA MANGO ROAD
SUITE 15
WEST PALM BEACH, FL 33409 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DONALD C MALASKY REVOCALBE TRUST
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VS () Delete
Name: BRUCE A MALASKY REVOCABLE TRUST
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VT () Delete
Name: STEPHEN P MALASKY REVOCABLE TRUST
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MALASKY, DONALD C TRUSTEE
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VS (X) Change () Addition
Name: MALASKY, BRUCE A TRUSTEE
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VT (X) Change () Addition
Name: MALASKY, STEPHEN P TRUSTEE
Address: 1300 N. FLORIDA MANGO ROAD, SUITE 15
City-St-Zip: WEST PALM BEACH, FL 33409

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: BRUCE A. MALASKY

VS

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date