

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000028299

Entity Name: PANHANDLE HOMES, INC.

FILED
Sep 06, 2005
Secretary of State

Current Principal Place of Business:

9389 HAMMAN AVE
SUITE C
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

9389 HAMMAN AVE
SUITE C
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-3317923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, TAUNIA W
1621 WEST 1/2 MILE RD.
CANTONMENT, FL 32533 US

Name and Address of New Registered Agent:

WILLIAMS, TAUNIA W
5100 BARRINEAU PARK SCHOOL RD
MOLINO, FL 32577 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: TAUNIA WILLIAMS

09/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, THOMAS D
Address: 1621 WEST 1/2 MILE RD.
City-St-Zip: CANTONMENT, FL 32533

Title: STVP () Delete
Name: WILLIAMS, TAUNIA S
Address: 1621 9 1/2 MILE RD
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILLIAMS, THOMAS D
Address: 5100 BARRINEAU PARK SCHOOL RD
City-St-Zip: MOLINO, FL 32577

Title: STVP (X) Change () Addition
Name: WILLIAMS, TAUNIA S
Address: 5100 BARRINEAU PARK SCHOOL RD
City-St-Zip: MOLINO, FL 32577

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TAUNIA WILLIAMS

STYP

09/06/2005

Electronic Signature of Signing Officer or Director

Date