

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000085331

FILED
Aug 14, 2007
Secretary of State

Entity Name: RONNIE'S MANUFACTURED HOMES, INC.

Current Principal Place of Business:

34299 HWY 27
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

34299 HWY 27
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-3382542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAYTON, RONALD
34299 HWY 27
HAINES CITY, FL 33844 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: D () Delete
Name: CLAYTON, RONALD
Address: 34299 HWY 27
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: CLAYTON, PATRICIA
Address: 34299 HWY 27
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAYTON, RONALD
Address: 34299 HWY 27
City-St-Zip: HAINES CITY, FL 33844

Title: ST (X) Change () Addition
Name: CLAYTON, PATRICIA
Address: 34299 HWY 27
City-St-Zip: HAINES CITY, FL 33844

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: PATRICIA CLAYTON

ST

08/14/2007

Electronic Signature of Signing Officer or Director

Date