2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 05, 2007 08:00 Al Secretary of State

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1. Entity Name

NEW GENERATION HOME BUILDERS, INC.



Principal Place of Business

5538-A N.W. 43RD STREET GAINESVILLE, FL 32653 Mailing Address

5538-A N.W. 43RD STREET GAINESVILLE, FL 32653



03152007

No Chg-P

CR2E034 (11/05)

4. FEI Number . 59-3354542 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

ROSS, BONNIE 5538-A N.W. 43RD STREET GAINESVILLE, FL 32653

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GAINESV	ILLE, FL 32653	,	IN THIS SPACE						
	named entity submits this statement for the pitions of registered agent.	urpose of changing its registe	ered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept				
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registe	ored Agent signature	required when reinstating)	DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fin Trust Fund Contribution		\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS	福門 () 中华	signatu inti (s	表現實施學。例為於學籍的文學等的為可以可以以 · ·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SEAY, TRINA P O BOX 357153 GAINESVILLE, FL 32635								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROSS, TONY S. 2909 NW 162ST NEWBERRY, FL 32669				U00000692207 04/13/07-80041-004-150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROSS, BONNIE L 5538 A NW 43ST GAINESVILLE, FL 32653			DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-2IP	P ROSS, LARRY J 5538-A NW 43RD STREET GAINESVILLE, FL 32653			IN:	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-							
TITLE NAME		•							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNATURE

STREET ADDRESS CITY-ST-ZIP

Bonnie L. Ross

Draw Fles

3/22/07 353-377680/