

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087793

FILED
Mar 24, 2008
Secretary of State

Entity Name: NEW GENERATION HOME BUILDERS, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

15207 WEST NEWBERRY RD
NEWBERRY, FL 32669

Current Mailing Address:

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

New Mailing Address:

15207 WEST NEWBERRY RD
NEWBERRY, FL 32669

FEI Number: 59-3354542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

ROSS, BONNIE
324 NW 154TH ST
NEWBERRY, FL 32669 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:

03/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SEAY, TRINA
Address: P O BOX 357153
City-St-Zip: GAINESVILLE, FL 32635

Title: VPD () Delete
Name: ROSS, TONY S.
Address: 2909 NW 162ST
City-St-Zip: NEWBERRY, FL 32669

Title: T () Delete
Name: ROSS, BONNIE L
Address: 5538 A NW 43ST
City-St-Zip: GAINESVILLE, FL 32653

Title: P (X) Delete
Name: ROSS, LARRY J
Address: 5538-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: SEAY, TRINA
Address: 14260 WEST NEWBERRY RD #137
City-St-Zip: NEWBERRY, FL 32669

Title: P (X) Change () Addition
Name: ROSS, TONY S.
Address: 14260 WEST NEWBERRY RD #167
City-St-Zip: NEWBERRY, FL 32669

Title: T (X) Change () Addition
Name: ROSS, BONNIE L
Address: 324 NW 154TH STREET
City-St-Zip: NEWBERRY, FL 32669

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: TRINA SEAY

S

03/24/2008

Electronic Signature of Signing Officer or Director

Date