

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000018179

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: MEDALLION HOMES OF PALM BEACH, INC.

## Current Principal Place of Business:

700 US #1  
STE H  
NORTH PALM BEACH, FL 33408 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 14547  
PALM BEACH GARDENS, FL 334080547 US

## New Mailing Address:

FEI Number: 65-0663200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

O'BRIEN, CHRISTOPHER J  
700 US #1  
SUITE H  
NORTH PALM BEACH, FL 33408 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: DPS ( ) Delete  
Name: O'BRIEN, CHRISTOPHER J  
Address: STE H 700 US HWY #1, STE H  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VD ( ) Delete  
Name: WILSON, RANDY  
Address: 700 US #1, STE H  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: VD (X) Delete  
Name: WILSON, GAINES R  
Address: 700 US #1  
City-St-Zip: NORTH PALM BEACH, FL 33408

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: O'BRIEN, CHRISTOPHER J  
Address: STE H 700 US HWY #1  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHRISTOPHER J. O'BRIEN

PRES

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date