## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000044581

Entity Name: BETTER BUILDERS & RENOVATORS INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:  1652 HULL COURT			New Princ	New Principal Place of Business:		
WELLINGTON, FL 33414						
Current Mailing Address:			New Mailir	New Mailing Address:		
1652 HULL COURT WELLINGTON, FL 33414						
FEI Number: 65-0672099 FEI Number Applied For ( ) FEI Numb				ber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1652 HULL COURT				BURGESS, ZOIE P 11737 GREENBRIAR CIRCLE WELLINGTON, FL 33414 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.						
SIGNATUR	E: ZOIE P. BL	RGESS			04/30/2008	
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () D PERKINS, TY D 1652 HULL COUF WELLINGTON, FI		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () C PERKINS, THELM 1652 HULL COUF WELLINGTON, FI	₹Т	Title: Name: Address: City-St-Zip:	VP PEAKES, MA 972 SAGE AV WELLINGTO	VENUE	
Title: Name: Address: City-St-Zip:	D () D VANDERLOUIS, F 950 RAYFIELD H SEVIERVILLE, TN	RICHARD OLLOW WAY	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	TS () D BURGESS, ZOIE 11737 GREENBR WELLINGTON, FI	IAR CIRCLE	Title: Name: Address: City-St-Zip:	BURGESS, S	NBRIAR CIRCLE	
Title: Name: Address: City-St-Zip:	( ) [	elete	Title: Name: Address: City-St-Zip:	PERKINS, PA	RWAY COVE DRIVE	
Title: Name: Address: City-St-Zip:	( ) [	elete	Title: Name: Address: City-St-Zip:	PEAKES, RC 972 SAGE AV		

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: PAMELA PERKINS T 04/30/2008