2007 FOR PROFIT CORPORATION

DOCUMENT # P8800009008 1. ENSY Name MACCLENNY MARUFACTURED HOMES, INC.  Principal Place of Business Secretary of State 05-11-2007 90024 010 ****150.00  ***Honoral Place of Business MACCLENNY H. 20093  ***MINE OF PARTICLES  ***DEST PLACE OF PARTICLES  ***		ANNUAL N	EPUNI (AN	<u> </u>	Mav 11, 2007 8:00 am	
MACCLENNY MANUFACTURED HOMES, INC.  OS-11-2007 90024 010 ***150.00  International Page of Bisiness  MACCLENNY R 20083					Secretary of State	
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SADA AND TO BE CONTROL   PLEATING   P.D. TON 1751	5293 WOO MACCLENI	DLAWN ROAD	P O BOX 721 MACCLENNY FL 3206	63		
Solicy April 19	Principal F		3. Mailing Address P.D. Box 1	351		
A State Part   Florida   A FEI Number   59-3495607	11 - 13	. #, etc.			1st MOORE CR2E034 (10/06)	
STAPLETON, PATRICIA J S293 WOODLAWN ROAD MACCLENNY FL 32063  8. The above named entity submits this statement for the purpose of changing its registrored agent, or both, in the State of Rerids. I am familiar with, and accept the obligations of registrored agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGEST O OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGEST O OFFICERS AND DIRECTORS IN III  BILL  DPS1 SIST ARRIES  OFFI S. P.P.  OFFICERS AND DIRECTORS IN III  BILL  DPS1 SIST ARRIES  OFFI S. P.P.  OFFICERS AND DIRECTORS IN III  BILL  DPS1 SIST ARRIES  OFFI S. P.P.  OFFI C. Barries  OFFI S. P.P.  OFFI C. Barries  OFFI S. P.P.  IIII  MARK  SIRIT ARRIESS  OFFI S. P.P.  IIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIII  Debde  IIIII  Debde  IIIIII  Debde  IIIII  Debde  IIIIII  Debde  IIIII  Debde  IIIIII  Debde  IIIII  Debde  IIIII  Deb				Florida	59-3495007	
STAPLETON, PATRICIA J S293 WOODLAWN ROAD MACCLENNY FL 32063  8. The above hander entry submits the istalation for the purpose of changing its registered affect or registered agent, or both, in the State of Rorda. I am familiar with, and accopt time obligations of registered agent.  SIGNATURE Reports, whether previous agent and introduceds.  OXFICE Reports and address and and address and	Zip 32	218 Country. Duval	Zip 3238	Country Duv	5. Certificate of Status Desired	
THELLER		6. Name and Address of Current F	Registered Agent			
Signature:  8. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am termiliar with, and accept the obligations of registered agent with a realisable.    Signature:				Name 1	Patainia T Stantel	
8. The above named entity submits this statement for the purpose of changing its registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOWIT! FEE IS \$150.00  After May 1, 2007 Fee Will Be \$550.00  Make Check Payable to Florida Department of State  10.	529	3 WOODLAWN ROAD		Street Ad		
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