

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000055196

FILED
Sep 05, 2007
Secretary of State

Entity Name: PEARSON'S MANUFACTURED HOUSING SPECIALISTS, INC.

Current Principal Place of Business:

5655 SAUFLEY FIELD RD.
D
PENSACOLA, FL 32526 US

New Principal Place of Business:

Current Mailing Address:

2172 W NINE MILE RD
BOX 376
PENSACOLA, FL 32534

New Mailing Address:

FEI Number: 59-3522303 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHASE, JAMES L
101 EAST GOVERNMENT STREET
PENSACOLA, FL 32501 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEARSON, ARNOLD F JR
Address: 5655-D SAUFLEY FIELD RD
City-St-Zip: PENSACOLA, FL 32526

Title: V () Delete
Name: HAGLER, LEE C JR.
Address: 5655-D SAUFLEY FIELD RD.
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: PEARSON, ARNOLD F JR.
Address: 5655-D SAUFLEY FIELD RD.
City-St-Zip: PENSACOLA, FL 32526

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: ARNOLD F PEARSON, JR.

VP

09/05/2007

Electronic Signature of Signing Officer or Director

Date