

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55645

FILED
Mar 15, 2007
Secretary of State

Entity Name: CHEROKEE CONSTRUCTION OF THE PALM BEACHES, INC.

Current Principal Place of Business:

14554 BOXWOOD DR
WEST PALM BEACH, FL 33418

New Principal Place of Business:

1547 SW HUNNICUT AVENUE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

14554 BOXWOOD DR
WEST PALM BEACH, FL 33418

New Mailing Address:

1547 SW HUNNICUT AVENUE
PORT SAINT LUCIE, FL 34953

FEI Number: 65-0265261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEMMIS, WILLIAM A.
14554 BOXWOOD DR
WEST PALM BEACH, FL 33418 US

Name and Address of New Registered Agent:

HEMMIS, WILLIAM A.
1547 SW HUNNICUT AVENUE
PORT SAINT LUCIE, FL 34953 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: _____

03/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCOY, KATHRYN G.,
Address: 14554 BOXWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33418

Title: DP () Delete
Name: HEMMIS, WILLIAM A
Address: 14554 BOXWOOD DR.
City-St-Zip: WEST PALM BEACH, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCCOY, KATHRYN G.,
Address: 1547 SW HUNNICUT AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: DP (X) Change () Addition
Name: HEMMIS, WILLIAM A
Address: 1547 SW HUNNICUT AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM A. HEMMIS

DP

03/15/2007

Electronic Signature of Signing Officer or Director

Date