2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 02, 2007 08:00 AM **DOCUMENT # S75284 Secretary of State** 1. Entity Name NDC BUILDERS OF FLORIDA, INC. Mailing Address Principal Place of Business P O BOX 551260 2901 W. SR 434 JACKSONVILLE, FL 32255 SUITE 131 LONGWOOD, FL 32779 US 03282007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3082185 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANSBACHER & SCHNEIDER, P.A. DO NOT WRITE 5150 BELFORT RD **BLDG 100** IN THIS SPACE JACKSONVILLE, FL 32256 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE (NOTE: Registered Agent aignature required when reinstating) Signature, typed or printed name of registered epent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS DPST TITLE NAME SCHWARTZ, WINSTON STREET ADDRESS 3528 LEGACY HILLS CT CITY-SI-7IP LONGWOOD, FL 32779 TITLE 1/00/00/0685966 STREET ADDRESS - 04/09/07-80026-024 150.0D CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

TITLE MALKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

CITY-ST-ZIP

Applied For

Not Applicable