

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G63461

1. Entity Name

CONTEMPORARY HOMES BY SINTON, INC.

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90179 006 ***150.00

0439178

Principal Place of Business

1299 SW JASMINE TRACE
PALM CITY FL 34990

Mailing Address

1299 SW JASMINE TRACE
PALM CITY FL 34990

2. Principal Place of Business

33 N River Rd

3. Mailing Address

33 N. River Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Stuart FL

City & State

Stuart FL

4. FEI Number

59-2341367

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SINTON, PAUL W.
1299 SW JASMINE TRC
PALM CITY FL 34990

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

33 N. River Rd

City

Stuart

FL

Zip Code

34996

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	SINTON, PAUL W	
STREET ADDRESS	3461 SE KUBIN AVE.	
CITY-ST-ZIP	STUART, FL 00000	
TITLE	DS	☐ Delete
NAME	SINTON, JOANNE L.	
STREET ADDRESS	3461 SE KUBIN AVE.	
CITY-ST-ZIP	STUART FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Paul Sinton	☐ Change ☐ Addition
NAME	33 N. River Rd	
STREET ADDRESS	Stuart, FL 34996	
CITY-ST-ZIP		
TITLE	Joanne Sinton	☐ Change ☐ Addition
NAME	33 N. River Rd	
STREET ADDRESS	Stuart, FL 34996	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joanne Sinton

Joanne Sinton

1/25/01

561-287-8911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)