

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000100138

1. Entity Name
CENTEX REALTY, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90235 015 ***150.00

Principal Place of Business
**2728 N HARWOOD ST
DALLAS TX 75201
US**

Mailing Address
**P. O. BOX 199000
DALLAS TX 75219
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2736100**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301-2525**

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP CHAMPION, THOMAS D III 6620 SOUTHPOINT DRIVE SOUTH, SUITE 400 JACKSONVILLE FL 32216 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP SMITH, DOUGLAS W 6620 SOUTHPOINT DRIVE SOUTH, SUITE 400 JACKSONVILLE FL 32216 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | AVP MASON, JEFF A 2728 N HARWOOD ST DALLAS TX 75201 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | AVP HARVEY, RICHARD C 2728 N HARWOOD ST DALLAS TX 75201 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SEE ATTACHED LIST FOR ADDITIONAL OFFICERS AND DIRECTORS | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete |

| | | |
|--|----------|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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:

Jeff A. Mason

JEFF A. MASON

4/16/01

(214) 981-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

B0057136

#P97000100138

CENTEX REALTY, INC.
2001 UNIFORM BUSINESS REPORT

DOCUMENT # P97000100138

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE D
NAME Timothy R. Eller
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE D
NAME Andrew J. Hannigan
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE D/P
NAME Douglas W. Smith
ADDRESS 385 Douglas Ave., Suite 1000
CITY-ST-ZIP Altamonte Springs, FL 32714

D

CHANGE

TITLE D
NAME Joel C. Sowers, Jr.
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE D/GC/AS
NAME Burgess N. Trank, Jr.
ADDRESS 385 Douglas Ave., Suite 1000
CITY-ST-ZIP Altamonte Springs, FL 32714

D/EVP

CHANGE

TITLE SVP
NAME W. Trent Bass
ADDRESS 8198 Jog Road
CITY-ST-ZIP Boynton Beach, FL 33437

TITLE SVP
NAME Gary L. Jernigan
ADDRESS 5110 Eisenhower, Suite 250
CITY-ST-ZIP Tampa, FL 33634

DELETE

SVP
Michael J. Belmont
301N. Cattlemen Rd., Ste. 108
Sarasota, FL 34232

ADDITION

TITLE VP
NAME Thomas D. Smith
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

DELETE

SVP
Patrick J. Knight
385 Douglas Ave., Suite 2000
Altamonte Springs, FL 32714

ADDITION

TITLE
NAME
ADDRESS
CITY-ST-ZIP

SVP
Edward G. Milgrim
385 Douglas Ave., Suite 1000
Altamonte Springs, FL 32714

ADDITION

TITLE
NAME
ADDRESS
CITY-ST-ZIP

SVP/AS
Robert S. Porter
6620 Southpoint Dr. S., Suite 400
Jacksonville, FL 32216

ADDITION

TITLE SVP
NAME Timothy J. Ruemler
ADDRESS 5801 Pelican Bay Blvd., Suite 600
CITY-ST-ZIP Naples, FL 34108

TITLE VP
NAME Thomas D. Champion, III
ADDRESS 6620 Southpoint Dr. S., Suite 400
CITY-ST-ZIP Jacksonville, FL 32216

VP

ADDITION

NAME James E. Cooper
ADDRESS 385 Douglas Ave., Suite 1000
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE VP
NAME E. Wilson Dove
ADDRESS 385 Douglas Ave., Suite 1000
CITY-ST-ZIP Altamonte Springs, FL 32714

ADDITION

Attachment

B005736
CHANGE #p97 000/00/38

TITLE VP
NAME Richard Fadil
ADDRESS 385 Douglas Ave., Suite 1000
CITY-ST-ZIP Altamonte Springs, FL 32714

155 Crystal Beach Dr., Suite 125
Destin, FL 32541

TITLE
NAME
ADDRESS
CITY-ST-ZIP

VP
K. Reid Hotaling
8198 Jog Road
Boynton Beach, FL 33437

ADDITION

TITLE T
NAME Melvin M. Chadwick
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE S
NAME Raymond G. Smerge
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE AVP
NAME Richard C. Harvey
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE AVP
NAME Jeff A. Mason
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE AT
NAME Leona Hammond
ADDRESS 8198 Jog Road
CITY-ST-ZIP Boynton Beach, FL 33437

DELETE

AT
Angela D. Gould
6620 Southpoint Dr. S., Suite 400
Jacksonville, FL 32216

ADDITION

TITLE
NAME
ADDRESS
CITY-ST-ZIP

AT
Karoline E. Matthai
385 Douglas Ave., Suite 2000
Altamonte Springs, FL 32714

ADDITION

TITLE AT
NAME Michael S. McLeod
ADDRESS 5801 Pelican Bay Blvd., Suite 600
CITY-ST-ZIP Naples, FL 34108

TITLE AT
NAME Candice Paulsen
ADDRESS 6620 Southpoint Dr. S. Suite 400
CITY-ST-ZIP Jacksonville, F: 32216

TITLE AT
NAME Nancy Reynolds
ADDRESS 5110 Eisenhower, Suite 250
CITY-ST-ZIP Tampa, FL 33634

TITLE AT
NAME Vicki Roberts
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

TITLE
NAME
ADDRESS
CITY-ST-ZIP

AS
Kathleen B. McCamey
2728 N. Harwood St.
Dallas, TX 75201

ADDITION

TITLE
NAME
ADDRESS
CITY-ST-ZIP

AS
Andrew V. Showen
385 Douglas Ave., Suite 1000
Altamonte Springs, FL 32714

ADDITION

TITLE AS
NAME Brian Woram
ADDRESS 2728 N. Harwood St.
CITY-ST-ZIP Dallas, TX 75201

Attachment

CENTEX REALTY, INC.
2728 NORTH HARWOOD STREET
DALLAS, TEXAS 75201

B0057136

#P97000100/38

04/10/2001

Uniform Business Report
Division of Corporations

P.O. Box 1500
Tallahassee FL 32302-1500

Gentlemen:

Enclosed is the following :

Return: FL Foreign Annual

Period: 2001

Amount: \$ 150.00

Sincerely,

James R. Palmer

Enclosures

TAX DEPT

JRP

U.S. POSTAL SERVICE
CERTIFICATE OF MAILING

Received From:
CENTEX REALTY, INC.
P.O. Box 199000

DALLAS, TEXAS 75219

One piece of ordinary mail addressed to:
Uniform Business Report - Division of Corporations

PO Box 1500
Tallahassee FL 32302-1500

MAY BE USED FOR DOMESTIC AND INTERNATIONAL MAIL, DOES NOT
PROVIDE FOR INSURANCE --POSTMASTER

PS FORM 3817
MAY 1976

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