

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90130 043 ***150.00

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DOCUMENT # 185184

1. Entity Name

COMMUNITY BUILDERS ASSOCIATION, INC.



Principal Place of Business

RALEIGH R RAWLS

FORT LAUDERDALE FL 33311

Mailing Address

RALEIGH R RAWLS

1024 NW 6TH STREET

FORT LAUDERDALE FL 33311

2. Principal Place of Business

1024 N.W. Sixth Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Florida

City & State

4. FEI Number

65-0001519

Applied For

Not Applicable

Zip

Country

33311

Broward

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

RAWLS, RALEIGH R

1024 NW 6TH STREET

FORT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PT** ☐ Delete
NAME **RAWLS, RALEIGH R**
STREET ADDRESS **1024 NW 6TH STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

TITLE **V** ☐ Delete
NAME **ROACH, ERIC C**
STREET ADDRESS **7502 FAIR OAKS AVENUE #1107**
CITY-ST-ZIP **DALLAS-TX-75230**

TITLE **S** ☐ Delete
NAME **ROACH, HAROLD**
STREET ADDRESS **804 LYNNFIELD DRIVE**
CITY-ST-ZIP **ARLINGTON TX 76014**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Raleigh R. Rawls, Pres.

04/28/03

954. 467-7908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)