

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 16, 2001 08:00 AM**
Secretary of State**DOCUMENT # 328366**1. Entity Name
W.B. HOMES, INC.

Principal Place of Business

700 NW 107TH AVENUE

MIAMI
33172

FL

Mailing Address

700 NW 107TH AVENUE

MIAMI
33172

FL

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

59-1212785

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCCAIN, DAVID B., ESQ.
700 NW 107TH AVENUEMIAMI
33172

FL

US

7. Name and Address of New Registered Agent

Name

MCCAIN DAVID BESQ.

Street Address (P.O. Box Number is Not Acceptable)
700 NW 107TH AVENUECity
MIAMI

FL

Zip Code
33172

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 **DAVID B. MCCAIN****01/16/2001**

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 AS ☐ Delete
NAME SIERRA KATHLEEN E
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE T ☐ Delete
NAME MALCOM WAYNEWRIGHT
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE P ☐ Delete
NAME MILLER STUART A.
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE P ☒ Change ☐ Addition
NAME MILLER STUART A
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE VD ☐ Delete
NAME PEKOR, ALLAN J.
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE VD ☒ Change ☐ Addition
NAME PEKOR ALLAN J
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE VS ☐ Delete
NAME MCCAIN DAVID B
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DC ☐ Delete
NAME MILLER, LEONARD
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172TITLE DC ☒ Change ☐ Addition
NAME MILLER LEONARD
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL 33172

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: **David B. McCain**

VS

01/16/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)