## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

#### 535661 **DOCUMENT #**

1. Entity Name

RYLAND COMMUNITIES, INC.



# **FILED** Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90144 021 \*\*\*150.00

					`	2.2						
Principal Place of Business 255 PINE AVENUE NORTH OLDSMAR FL 34677				Mailing Address 24025 PARK SORRENTO SUITE 400 CALABASAS CA 91302 US					A A A A A A A A A A A A A A A A A A A			
Principal Place of Business     3. Mailing Address								!   1865      015      115      015		#1411 B181		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				,   CHECK HERE IF MAKING CHANGES				
City & State				City & State			4.	FEI Number <b>59-1741950</b>	741950 Applied For Not Applicable			
Zip Country			Zip		Country	try 5. Co		Certificate of Status Desired	\$8.75 Fee Re			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
				Nam	Name							
CORP. SERVICES COMPANY						(1)						
.1201 HAYS	ST				Stree	Street Address (P.O. Box Number is Not Acceptable)						
	201											
TALLAHASSEE FL 32301											İ	
							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.												
SIGNATIOE								•				
SIGNATURE												
After	FEE IS \$150.00 Fee will be \$550.00 Florida Department of	Stata				-	Election Campaign Financ     Trust Fund Contribution.	· – ·		May Be to Fees		
33.	Cayable to											
10.	P	OFFICERS AND D	DIRECTO		11.	15.	AD	DDITIONS/CHANGES TO OFFICER	•		IN 11	
				Delete	TITLE NAME	PD			Ch:	ange	Addition	
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STREET ADDRESS 2536 COUNTRYSIDE BLVDSUITE 250 CITY-ST-ZIP CLEARWATER FL 33763				STREET ADDRESS 25			536 COUNTRYSTOE BIVD, Suite 250					
CITY-ST-ZIP	CLEARWAI	EH FL 33/63			CITY-ST-ZIP	CLE	<u>ARu</u>	UATER, FL 3376	3			
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NAME ,	WRIGHT, V	VILLIAM			NAME					•		
STREET ADDRESS	255 PINE A	venue North			STREET ADDRES	is						
CITY-ST-ZIP	OLDSMAR	FL 34677			CITY-ST-ZIP							
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NAME	GECKLE, T	IMOTHY J			NAME	Gec	KLP	E. TIMOTHY IT	~~	•		
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		k sorrento suite 40 s ca 01202	IU		STREET ADDRES	S						
		S CA 91302			CITY-ST-ZIP	_1		· · · · · · · · · · · · · · · · · · ·	<del></del>			
12. I hereby ce indicated of	ertify that the	information supplied with to supplemental report is to	his filing	does not qualify for	the exemption s	tated in Se	ction 1	119.07(3)(i), Florida Statutes. I furth	ner certify that	the info	ormation	

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:

Attachment# 90030929

### RYLAND COMMUNITIES, INC.

**List of additional Officers** 

Corporate Identification No.: 535661

Federal Identification No.: **39-174195**0

### **OFFICERS:**

Asst. Vice President Kevin D. Huff

255 Pine Avenue North, Oldsmar, FL 34677 24025 Park Sorrento, Ste. 400, Calabasas, CA 91302 Asst. Secretary Sheri L. Markham

Asst. Secretary Angela Anetakis 255 Pine Avenue North, Oldsmar, FL 34677

Asst. Treasurer Harriet A. Britton 24025 Park Sorrento, Ste. 400, Calabasas, CA 91302