## DOCUMENT # 576477

1. Entity Name

## FILED Mar 26, 2001 8:00 am Secretary of State

J. & J. HOMES, INC.					03-26-2001 90139 038 ***150.00			
Principal, Place of Business 1901 S. TAMIAMI TR. SUITE A VENICE FL 34293 US 2. Principal Place of Business		Mailing Address 1901 S. TAMIAMI TR. SUITE A VENICE FL 34293 US						
		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. 1	FEI Number 59-1830084	ber <b>59-1830084</b> Applied For Not Applicable		
Zip	Country	Zip	Country	5. (	Certificate of Status Desired		8.75 Add se Required	
	6. Name and Address of Curre	ent Registered Agent	Name	7.	Name and Address of New Re	gistered Ag	ent	
MACRIS, STEVEN W 609 S.TAMIAMI TR. VENICE FL 34285			Street	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code	e .
Tax filing (See crite	Signature, typed or printed name of registered as oration is eligible to satisfy its Intang requirement and elects to do so. ria on back)	ble FILE NOV After MAY 1,		0.00 \$550.00 ent of State	10. Election Campaign Fina Trust Fund Contribution	🗆	Added	May Be
11.		ND DIRECTORS	12.	AD	DITIONS/CHANGES TO OFFI			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CLOUTIER, JACQUES 1901 S. TAMIAMI TRAIL VENICE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS THERIAULT, JAMES J. 6111 RODGERS AVENUE SARASOTA FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			[	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		رہیں ہے کہ یہ دو اور اور اور اور اور اور اور اور اور او	[	_Change	☐ Addition
TITLE		☐ Delete	TITLE NAME STREET ADDRESS			ĵ	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP					}
STREET ADDRESS		☐ Delete	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				Change	Addition

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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:

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR