## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT# 638869**

Entity Name: MAGNOLIA BUILDERS, INC

3443 MAI KAI DRIVE

PENSACOLA, FL 00000,

Address:

City-St-Zip:

FILED May 01, 2002 8:00 AM Secretary of State

		ir ( Boilebeiro, ii vo.				
Current Principal Place of Business:			New Principal Place of Business:			
12630 LILL PENSACC	IAN HWY DLA, FL 32506	US				
Current Mailing Address:			New Mailing Address:			
PO BOX 1 LILLIAN, A						
FEI Number	: 59-2099438	FEI Number Applied For()	FEI Number Not Applicable	e() Certificate of Status Desired()		
Name and	Address of C	urrent Registered Agent:	Name and Add	Name and Address of New Registered Agent:		
1201 HAYS TALLAHAS The above	ATION SERVICES STREET SSEE, FL 3230  named entity see of Florida.	01 US	urpose of changing its re	gistered office or registered agent, or both,		
SIGNATUR						
Electronic Signature of Registered Agent			nt	Date		
		satisfy its Intangible Tax filing requ	uirement and elects to do so	(X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () LIECHTY, DARI 3443 MAI KAI D PENSACOLA, F	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GINGERICH, D	CREEK RANCH DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	GINGERICH, JA	CREEK RANCH DRIVE	Address: 100	D (X) Change ( ) Addition GERICH, JACOB L, 5 BEAVER CREEK RANCH DRIVE FIELD, CO 81122		
Title: Name:	D () LIECHTY, CARI	Delete ROLL D.	Title: Name:	( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JACOB GINGERICH VP 05/01/2002