

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90190 041 ***150.00

DOCUMENT # 653934

1. Entity Name
DRIFTWOOD BUILDERS, INC.



Principal Place of Business
**9185 RODEO DRIVE
LAKE WORTH FL 33467-1037**

Mailing Address
**9185 RODEO DRIVE
LAKE WORTH FL 33467-1037**



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 **59-1967554**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**FUNK, BARBARA
9185 RODEO DR
LAKE WORTH FL 33463**

7. Name and Address of New Registered Agent

Name **Jennifer Funk**
Street Address (P.O. Box Number is Not Acceptable)
**13655 68 Street No.
West Palm Beach**
City **FL** **FL** Zip Code **33412**

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 *Jennifer Funk* **Jennifer Funk** **4-18-03**
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	D	<input checked="" type="checkbox"/> Delete
NAME	FUNK, NORMAN L	
STREET ADDRESS	9185 RODEO DRIVE	
CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	FUNK, BARBARA J	
STREET ADDRESS	9185 RODEO DRIVE	
CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	D	<input type="checkbox"/> Delete
NAME	FUNK, RANDOLPH	
STREET ADDRESS	9185 RODEO DRIVE	
CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Randolph Funk	
STREET ADDRESS	13655 68 Street No.	
CITY-ST-ZIP	West Palm Beach, FL 33412	
TITLE	Secretary-Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jennifer Funk	
STREET ADDRESS	13655 68 Street No.	
CITY-ST-ZIP	West Palm Beach, FL 33412	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *Jennifer Funk* **Jennifer Funk** **4-18-03** **561-793-4320**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)