2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#718172

Entity Name: TREASURE COAST BUILDERS ASSOCIATION, INC.

Apr 07, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6560 SOUTH FEDERAL HWY PORT ST LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

6560 SOUTH FEDERAL HWY PORT ST LUCIE, FL 34952

FEI Number: 59-1535209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KAVANAGH, GAIL H 6560 SOUTH FEDERAL HWY PORT ST LUCIE, FL 34952

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KEMPER, ROBERT KEMPER, ROBERT Name: Name: 5126 SE FEDERAL HWY Address: 5126 SE FEDERAL HWY Address:

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997 Title: Title:

() Delete (X) Change () Addition TOULSON, VERNON TOULSON, VERNON Name: Name: Address: 4621 PEBBLE BAY EAST Address: 4621 PEBBLE BAY EAST City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

Title: PPD () Delete Title: (X) Change () Addition BUFORD, DENNIS FERSCHKE, RON Name: Name:

3600 NE M CARI LANE Address: Address: 606 CAMDEN AVE City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: STUART, FL 34994

Title: VD () Delete Title: PD (X) Change () Addition THOMPSON, DAVID Name: Name: THOMPSON, DAVID

645 BEACHLAND BLVD #5 Address: Address: 645 BEACHLAND BLVD #5 City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

Title: () Delete Title: (X) Change () Addition BROWN, ARLENE BROWN, ARLENE Name: Name:

1720 SE PORT ST LUCIE BLVD 1720 SE PORT ST LUCIE BLVD Address: Address:

PORT ST LUCIE, FL 34952 City-St-Zip: City-St-Zip: PORT ST LUCIE, FL 34952

Title: () Delete Title: (X) Change () Addition PEELER, CAROLYN COOPER, GEORGE Name: Name:

Address: **6080 20TH STREET** Address: 9865 SE BRIDGE RD #105A STUART, FL 34994 City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE BROWN VD 04/07/2003