## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #** 817619 1. Entity Name CRAWFORD HOMES, INC.

## **FILED** May 05, 2002 8:00 am § Secretary of State 05-05-2002 90065 044 \*\*\*150.00

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Principal Pla	ace of Business	,	Mailing Address					
1629 WINCHESTER RD P.O.BOX 30185 AMF MEMPHIS TN 38130			1629 WINCHESTER RD P.O.BOX 30185 AMF MEMPHIS TN 38130					
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2. Principal	Place of Business	3.	. Mailing Address	-				
Suite, Ap	ot. #, etc.		Suite, Apt. #, etc.			DO NOT W	/RITE IN THIS SPACE	
City & Sta	ate		City & State			4. FEI Number 72-04522	269	Applied For
Zip 	Country		Zip	Country		5. Certificate of Status Desired		Not Applicable Additional
	6. Name and Address o	of Current Regi	stered Agent			7. Name and Address of Nev		uirea -
		~~		Na Na	ame		g.c.c.ca regent	
	RATION SERVICE COMPAN	VY		Str	reet Address (B.	O. Box Number is Not Accepta	· <del></del>	
1201 HA	NYS STREET			5.1	—	O. BOX NUMBER IS NOT Accepta	ible)	
TALLAHA	ASSEE FL 32301				·		·	<u> </u>
				Cit	у		FL Zip C	ode
8. The above	e named entity submits this sta	atement for the	purpose of changing	its registered off	ice or registered	agent, or both, in the State of	——————————————————————————————————————	
SIGNATURE	Signature, typed or printed name of regi	istered agent and title	if applicable. (No	OTE: Registered Agent	signature required who	en reinstating)	DATE	
Tax filing	Signature, typed or printed name of regi- oration is eligible to satisfy its requirement and elects to do seria on back).	Intangible	FILE NOV After May 1, 2	OTE: Registered Agent W!!! FEE IS \$ 2002 Fee will be able to Depart	150.00 pe \$550.00	en reinstating)  10. Election Campaign F  Trust Fund Contribut		.00 May Be
9. This corp	Signature, typed or printed name of region poration is eligible to satisfy its requirement and elects to do seria on back).  OFFICE	Intangible so.	FILE NOV After May 1, 2 Make Check Pays	N!!! FEE IS \$ 2002 Fee will b	150.00 pe \$550.00 ment of State	10. Election Campaign F Trust Fund Contribut	Financing \$5	ded to Fees
9. This corp Tax filing (See crite 11.	Signature, typed or printed name of region oration is eligible to satisfy its requirement and elects to do seria on back).  OFFICE	Intangible so.	FILE NOV After May 1, 2 Make Check Pays	W!!! FEE IS \$ 2002 Fee will bable to Depart	150.00 pe \$550.00 ment of State	10. Election Campaign F	Financing \$5 tion.	DRS IN 11
9. This corp Tax filing (See crite 11.	signature, typed or printed name of region oration is eligible to satisfy its requirement and elects to do saria on back).  OFFICE  D  WILSON, KEMMONS	Intangible so.	FILE NOV After May 1, 2 Make Check Pays CTORS	W!!! FEE IS \$ 2002 Fee will bable to Depart	150.00 pe \$550.00 ment of State	10. Election Campaign F Trust Fund Contribut	Financing \$5	DRS IN 11
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS	signature, typed or printed name of region or ation is eligible to satisfy its requirement and elects to do satisfy on back)  OFFICE  D  WILSON, KEMMONS 1629 WINCHESTER	Intangible so.	FILE NOV After May 1, 2 Make Check Pays CTORS	W!!! FEE IS \$ 2002 Fee will be able to Depart  12.  TITLE  NAME  STREET ADDR	150.00 pe \$550.00 ment of State	10. Election Campaign F Trust Fund Contribut	Financing \$5 tion.	DRS IN 11
9. This corp Tax filling (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	signature, typed or printed name of region oration is eligible to satisfy its requirement and elects to do seria on back).  OFFICE D WILSON, KEMMONS 1629 WINCHESTER MEMPHIS, TN 00000	Intangible so.	FILE NOV After May 1, 2 Make Check Pays CTORS	W!!! FEE IS \$ 2002 Fee will to Depart  12.  TITLE  NAME	150.00 pe \$550.00 ment of State	10. Election Campaign F Trust Fund Contribut	Financing \$5 tion.	DRS IN 11
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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

SIGNATURE: