FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2002 8:00 am Secretary of State

	2./		Secretary of	of State	
DOCUMENT # \$3327	10	, t	04-29-2002 90126 02		
1. Entity Name		,	04-29-2002 901 26 02	29 ****130.00	
Horton Homes, Inc.					
			* # .		
			,		
DO NOT WRITE	IN THIS SPA	CE			
DO MOT WINITE					
Division Disease (Division II	3 Mailing Address		·		
2. Principal Place of Business 101 Industrial Blvd	P.O. Drawer 4410		·		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
	<u> </u>		4. FEI Number	Applied For	
— City & State	City & State) .	58-1087227	Not Applicable	
atonton, Ga	[U.5	E. Cartificate of Status Desired	8.75 Additional	
31024 45	31024	uo	ree Required		
		Nomo - 0	7. Name and Address of Current Registered	Agent	
			orporation-Dysum	· · · · · · · · · · · · · · · · · · ·	
DO NOT W	KIIE	Street Address (I	RO. Box Number is Not Acceptable)	vad	
IN THIS SE	PACE	1000 A	CITATIVE TO THE STATE OF THE ST		
114 11110 01	,	0: 0(Zip Code	
City Pla			ntation FL 2033324		
8. The above named entity submits this statement for	or the purpose of changing its regis	stered office or register	red agent, or both, in the State of Florida.		
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>,</i>				
SIGNATURE	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	(DATE		
Signature, typed or printed name of registered agent		istered Agent signature required	d when reinstating)		
9. This corporation is eligible to satisfy its Intangible	January 1 - May 1 After May 1, F	Fee is \$150.00 ee is \$550.00	10. Election Campaign Financing	\$5.00 May Be	
Tax filing requirement and elects to do so. Amended to		3R is \$61.25	Trust Fund Contribution.	Added to Fees	
(See criteria on back)	Make Check Payable to	Department of Sta	ite		
11. OFFICERS AND	DIRECTORS	TITLE			
TITLE President NAME N.D. Hurton Ir.		NAME			
STREET ADDRESS Industrial Blvd		STREET ADDRESS			
city-st-zip Fatonton Ga. 3102	4	CITY-ST-ZIP			
IME Executive Vice President		TITLE		,	
NAME William I. Weeks Sr.		NAME STREET ADDRESS			
STREET ADDRESS Barring ton Hall Drive CITY-ST-ZIP Forton Qu. 31024		CITY-ST-ZIP			
		TITLE			
TITLE Vice President NAME Steve M. Sinclair		NAME	Service .		
STREET ADDRESS 554 Milledaville Road		STREET ADDRESS	DO NOT WRI	TE	
CITY-ST-ZIP Entonton Gu. 310	24	CITY-ST-ZIP			
TITLE Vice President		TITLE NAME	IN THIS SPACE	SE	
NAME R.W. HICKS, Tr.		STREET ADDRESS			
STREET ADDRESS Rose Creek	024	CITY-ST-ZIP			
TITLE Vice Tresident		TIŢLE			
NAME R.W. Hicks Sv.		NAME .			
STREET ADDRESS Rose Creek		STREET ADDRESS			
CITY-ST-ZIP Fatonton, Ga. 31	024	CITY-ST-ZIP			
TITLE Vice Pres Sec Ir	easurer	TITLE NAME			
NAME Helen N. Hoston		STREET ADDRESS			
STREET ADDRESS Industrial 13/Vd	31024	CITY-ST-ZIP			
13 I hereby certify that the information supplied w	ith this filing does not qualify for the	e exemption stated in S	Section 1.19.07(3)(i), Florida Statutes. I further cel	rtify that the information	
indicated on this report or supplemental report of the corporation or the receiver or trustee er	npowered to execute this report as	signature snall have the s required by Chapter (e same legal effect as if made under oath; that I is 607, Florida Statutes; and that my name appear	s in Block 11 or on an	
attachment with an address, with all other like	empowered.	**			

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR