200	1 UNI	FOF	RM BUSI	NESS REPC	RT	(UB	R)	ereby.	e de la companya de l		
DOCUMENT # 'A9700002129  1. Entity Name								FILED			
G.L. HOMES OF SILVER LAKES XXVIII, LTD.								01 APR 24 PM 6 18			
Principal Place of Business 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071				Mailing Address 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 3307			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
2. Principal Place of Business 3. Mailing Address											(  1  <b>3   </b>   1       1     <del>      </del>
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State				City & State				65-0797466		Applied For Not Applicable	
Zip	Country  6. Name and Address of Current R			Zip	Cour	Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required  7. Name and Address of New Registered Agent			
G.L. HOMES OF SILVER LAKES XXVIII CORP. 1401 UNIVERSITY DRIVE, SUITE 200 CORAL SPRINGS FL 33071						Street Address (P.O. Box Number is Not Acceptable)  City :   City :   Zip Code					
8. The above named entity submits this statement for the purpose of changing its register  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOT : Register								ed agent, or both,		) DATE	
9. Capital Contributions as Shown on record. \$125,000.00 in FLORIDA to contributions						shtributions \$125,000.00 11. MAKE CHECK PAYABLE TO DEPT. OF STA SEE REVERSE SIDE FOR FEE INFORMATION					
	A G	ENER	AL PARTNER TH	IAT IS A BUSINESS EN	TITY M	UST BE	REGIST	ERED AND AC	TIVE WITH THIS OF	FICE. I partner.	
NOTE: General Partners MAY NOT be changed on tile form; an amendmental.  12. GENERAL PARTNER INFORMATION 13.									ADDRESS CHANGE		
DOCUMENT # NAME STREET ADDRESS	P95000083730 G.L. HOMES OF SILVER LAKES XXVII CORP. 1401 UNIVERSITY DR., #200 CORAL SPRINGS FL 33071					EET ADDRESS - ST-ZIP			0000400		
DOCUMENT #	CURAL SPI	KINGS	FL 330/1		STRI	ET ADDRESS		ЬС	0000422 -05/16/01 ****526.2	01119	5012
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DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have ne same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

RICHARD M. NORWALK, V.P. GEN. PTR., G.L. HOMES OF SILVER LAKES XXVIII CORP.

V.P. GEN. PTR., G.L. HOMES OF SILVER LAKES XXVIII CORP. 4/13/01 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

NAME > STREET ADDRESS

CITY-ST-ZIP

954-753-1730

Daytime Phone #