

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90107 001 ***150.00

DOCUMENT # F01000003586

1. Entity Name

NATIONWIDE HOMES, INCORPORATED

Principal Place of Business

**1100 RIVES ROAD
 MARTINSVILLE VA 24115**

Mailing Address

**P.O. BOX 5511
 MARTINSVILLE VA 24115**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

54-1504881

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME **PCD** ☐ Delete
EVANS, RONALD C
 STREET ADDRESS **545 RIVERBEND DRIVE**
 CITY-ST-ZIP **ROCKY MOUNT VA 24151**

TITLE NAME **V** ☐ Delete
SEEKFOR, JAMES C
 STREET ADDRESS **20 COURTLAND ROAD**
 CITY-ST-ZIP **ROCKY MOUNT VA 24151**

TITLE NAME **S** ☐ Delete
WARD, R. NOEL
 STREET ADDRESS **1610 MEADOWVIEW LANE**
 CITY-ST-ZIP **MARTINSVILLE VA 24112**

TITLE NAME **T** ☐ Delete
GRISSETTI, F. MICHAEL
 STREET ADDRESS **2925 ALEAN ROAD**
 CITY-ST-ZIP **BOONES MILL VA 24065**

TITLE NAME **D** ☐ Delete
BOUTWELL, DAVID
 STREET ADDRESS **ONE RIVERCHASE PARKWAY SOUTH**
 CITY-ST-ZIP **BIRMINGHAM AL 35244**

TITLE NAME **D** ☐ Delete
MCLENDON, JOHN
 STREET ADDRESS **292 NORTH PINNACLE RIDGE ROAD**
 CITY-ST-ZIP **WATERBURY VT 05676**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME **D** ☐ Change ☒ Addition
William Brooke
 STREET ADDRESS **One Riverchase Parkway South**
 CITY-ST-ZIP **Birmingham, AL 35244**

TITLE NAME **D** ☐ Change ☒ Addition
Hugh B. Milteer, Jr.
 STREET ADDRESS **One Riverchase Parkway South**
 CITY-ST-ZIP **Birmingham, AL 35244**

TITLE NAME **SVD** ☒ Change ☐ Addition
R. Noel Ward
 STREET ADDRESS **1610 Meadowview Lane**
 CITY-ST-ZIP **Martinsville, VA 24112**

TITLE NAME **D** ☐ Change ☒ Addition
Beth Weatherford
 STREET ADDRESS **One Riverchase Parkway South**
 CITY-ST-ZIP **Birmingham, AL 35244**

TITLE NAME **V** ☐ Change ☒ Addition
Thomas C. Rakes
 STREET ADDRESS **6530 Dry Hill Road**
 CITY-ST-ZIP **Ferrum, VA 24088**

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: F. Michael Grissetti, F.D. of Finance

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/02 (276) 632-7100

Date

Daytime Phone #

CR2E034 (9/01)