## **2004 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

DOCUMENT # F01000003586 NATIONWIDE HOMES, INCORPORATED



94033497

Principal Place of Business Mailing Address

1100 RIVES ROAD MARTINSVILLE, VA 24115

Zip

SIGNATURE.

10.

P.O. BOX 5511 MARTINSVILLE, VA 24115

2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite Apt # etc. City & State City & State

Zip

**FILED** 

Mar 22, 2004 8:00 am Secretary of State

03-22-2004 90050 005 \*\*\*150.00

03162004

Chg-P

CR2E034 (10/03)

DATE

Ī	4. FEI Number			Applied For
	54-1504881			Not Applicable
	5. Certificate of Status Desired		\$8.75 Fee Re	Additional guired

6. Name and Address of Current Registered Agent

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

Country

7. Name and Address of New Registered Agent						
Name						
Street Address (P.O. Box Number is Not Acceptab	le)					
City	Zin 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. I am familiar with, and accept the obligations of registered agent.

Country

FILE NOW!!! FEE IS \$150.00

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

9. Election Campaign Financing

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

Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

(NOTE: Registered Agent signature required when reinstating)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WATSON, TONY K 15303 DALLAS PKWY STE 800 ADDISON, TX 75001	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEEKFORD, JAMES C 20 COURTLAND ROAD ROCKY MOUNT, VA 24151	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD WARD, R. NOEL 1610 MEADOWVIEW LANE MARTINSVILLE, VA 24112	<b>XX</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Rakes, Thomas C. 6530 Dry Hill Road Ferrum, VA 24088	☐ Change	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD KEENER, LARRY 15303 DALAS PKWY STE 800 ADDISON, TX 75001	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LCLL GRANT VIII 2 1000	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TACKE, KELLY 15303 DALAS PKWY STE 800 ADDISON, TX 75001	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Controller Montgomery, Steven T. 150 Lynch Dr., Apt. 30 Rocky Mount, VA 24151		<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FITZGERALD, MARK L 245 OAK ST ROCKY MOUNT, VA 24151	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all place in the empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date