

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90615 048 \*\*\*150.00

06/19/96 MB

**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**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **54-1504881**

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

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

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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD EVANS, RONALD C 545 RIVERBEND DRIVE ROCKY MOUNT VA 24151	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEEKORD, JAMES C 20 COURTLAND ROAD ROCKY MOUNT VA 24151	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WARD, R. NOEL 1610 MEADOWVIEW LANE MARTINSVILLE VA 24112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRISETTI, F. MICHAEL 2925 ALEAN ROAD BOONES MILL VA 24065	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOUTWELL, DAVID ONE RIVERCHASE PARKWAY SOUTH BIRMINGHAM AL 35244	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCLENDON, JOHN 292 NORTH PINNACLE RIDGE ROAD WATERBURY VT 05676	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Tony K. Watson 15303 Dallas Parkway, Suite 800 Addison, TX 75001	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Thomas C. Rakes 6530 Dry Hill Road Ferrum, VA 24088	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD R. Noel Ward 1610 Meadowview Lane Martinsville, VA 24112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Larry Keener 15303 Dallas Parkway, Suite 800 Addison, TX 75001	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kelly Tacke 15303 Dallas Parkway, Suite 800 Addison, TX 75001	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Mark L. Fitzgerald 245 Oak Street Rocky Mount, VA 24151	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 other like empowered.**

**SIGNATURE:**

**R. Noel Ward, Sr. Vice Pres. & Secy.**

**04/10/03 (276) 632-7100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)