2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 25, 2001 8:00 am **DOCUMENT # F89682 Secretary of State** SOUTHWEST FLORIDA HOMES INC. 01-25-2001 90180 031 ***150.00 Mailing Address Principal Place of Business 2065 CONSTITUTION BLVD REJAWAMA, INC. 2065 CONSTITUTION BLVD. SUITE A SARASOTA FL 34231 SARASOTA FL 34231 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2206445 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORRECTED 7. Name and Address of New Registered Agent FARRELL, WAYNE F. Street Address (P.O. Box Number is Not Acceptable) 2065 CONSTITUTION BLVD. ONSTI SARASOTA FL 33581 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FARRELL WAYNE F DO 2005 CONSTITUTION BIND TITI F TITLE ☐ Delete FARRELL, WAYNE F NAME NAME STREET ADDRESS 2065 CONSTITUTION BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RASOTA, F1 34231 SARASOTA FL ☐ Change ☐ Delete TITLE TITLE Boedecker, K. Judson 2065 CONSTITUTION BOEDECKER, K. JUDSON NAME NAME 2065 CONSTITUTION BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SARASOTA. SARASOTA FL ☐ Change _ ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP 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 receipt report is stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

of the corporation or the re changed, or on an attach