

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F93000002467

FILED
Feb 11, 2003
Secretary of State

Entity Name: ENTERPRISE HOUSING - LAKE WALES, INC.

Current Principal Place of Business:

833 WEST MAIN STREET
CARMEL, IN 46032

New Principal Place of Business:

Current Mailing Address:

833 WEST MAIN STREET
CARMEL, IN 46032

New Mailing Address:

FEI Number: 35-1873038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARDI, MICHAEL
915 CHESTNUT STREET
CLEARWATER, FL 34616 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DICKINSON, CURTIS
Address: 1520 TIMBER TRACE
City-St-Zip: KENNESAW, GA 30144

Title: D () Delete
Name: PHILLIPS, RHONDA
Address: 123 JERSEY #A
City-St-Zip: WESTFIELD, IN 46074

Title: STD () Delete
Name: LOCKHART, JEFFREY K
Address: 9675 HAMPTON CIRCLE S
City-St-Zip: INDIANAPOLIS, IN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DICKINSON, CURTIS
Address: 1520 TIMBER TRACE
City-St-Zip: KENNESAW, GA 30144

Title: P (X) Change () Addition
Name: PETERS, HUGH
Address: 307 MARSH POINT CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: STD (X) Change () Addition
Name: LOCKHART, JEFFREY K
Address: 9675 HAMPTON CIRCLE S
City-St-Zip: INDIANAPOLIS, IN 46256

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY K. LOCKHART

STD

02/11/2003

Electronic Signature of Signing Officer or Director

Date