## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## F98000001780 **DOCUMENT #**

1. Entity Name

CENTEX MULTI-FAMILY COMPANY

**FILED** May 02, 2003 8:00 am § Secretary of State

05-02-2003 90401 012 \*\*\*150.00

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<u> </u>											
Principal Place	e of Business	Mailin	g Address			ł					
2728 N. HARWOOD ST.		РОВ	P O BOX 199000								
DALLAS TX 752	201-1516	TAX D	DEPT.			ſ					
us		DALLA US	DALLAS TX 75219-9000 US								
2. Principal Place of Business		3. Mai	3. Mailing Address				6 70 <b>1</b> 1110 1116 111 <b>5</b> 1 10111 30111 01111	<b>68</b> 111 <b>60</b> 111 <b>60</b>	.B. 11011 1864 1	IBILL DRIF ISAL	
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State		City	City & State			1	FEI Number 0000004		$    \Delta$	pplied For	
City & State						75-2680894		N	ot Applicable		
Zip	Country	Zip		Country			Certificate of Status Desired		<b>\$8.75</b> Ad Fee Require		
	6Name and Address of Cu	rrent Registere	ed Agent			7. 1	Name and Address of New Re	gistered A	gent		
				j	Name					;	
CORPORAT 1201 HAYS	NON SERVICE COMPANY			ļ	Street Address (P.O. Box Number is Not Acceptable)						
	SEE FL 32301-2525										
				Ì	City			FL	Zip Cod	le	
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 _	<del></del>	<del> </del>						<del></del> .	. — —		
	Signature, typed or printed name of registered	agent and title if app	licable. (NOTE	E: Registered	Agent signature req	uired when re	einstating)	DATE			
	LE NOW!!! FEE IS \$150.00						9. Election Campaign Fina	ncina	<b>65</b> (	O May Be	
	May 1, 2003 Fee will be \$55						Trust Fund Contribution			d to Fees	
	Payable to Florida Departme						<u> </u>				
10.		AND DIRECTO		11,		AD	DITIONS/CHANGES TO OFFIC	CERS AND			
	AVF		Delete	TITLE	ľ				Change	Addition	
			NAME								
	2728 N. HARWOOD ST. DALLAS TX 75201-1516				T ADDRESS ST-ZIP					}	
	<del></del>			┪—	31*216	<del></del>	<del></del>				
J	VP		Delete	TITLE					☐ Change	☐ Addition	
	reed, Joel S 2728 N. Harwood St.			NAME	T ADDRESS						
	DALLAS TX 75201-1516				ST-ZIP						
	V		Delete	TITLE					_ Change	☐ Addition	
NAME	LOVELADY, KYLE D			NAME						-	
	2728 N. HARWOOD ST.				T ADDRESS					{	
CITY-ST-ZIP	DALLAS TX 75201-1516			CITY-	ST-ZIP		·				
TITLE	V		☐ Delete	TITLE					☐ Change	☐ Addition	
	winzeler, dennis k			NAME	,					J	
	2728 N. HARWOOD ST.			•	T ADDRESS						
CITY-ST-ZIP	DALLAS TX 75201-1516			CITY-	ST-ZIP						
	D		Delete	TITLE					☐ Change	☐ Addition	
	WEINBERG, STEPHEN M			NAME	1					1	
	2728 N. HARWOOD STREET				TADDRESS					}	
	DALLAS TX 75201-1516			CITY-	ST-ZIP						
4	SVP		Delete	TITLE	]				□ Change	☐ Addition )	
	NEWMAN, TODD D			NAME						}	
	2728 N. HARWOOD STREET				T ADDRESS					ļ	
<del></del>	DALLAS TX 75201-1516			CITY-							
12. Thereby co	ertify that the information supplied	d with this filing	does not qualify for	the exen	nption stated in	Section	119.07(3)(i), Florida Statutes. I f	urther cert	ify that the i	nformation	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR