

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000000988**

1. Entity Name

HOMEBUILDERS TITLE SERVICES, INC.**FILED**
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90180 012 ***158.75

Principal Place of Business

**5775 PEACHTREE DUNWOODY ROAD
SUITE B200
ATLANTA GA 30342**

Mailing Address

**5775 PEACHTREE DUNWOODY ROAD
SUITE B200
ATLANTA GA 30342**

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

58-2440984

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

647389**6. Name and Address of Current Registered Agent****C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324****7. Name and Address of New Registered Agent**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	MCCARTHY, IAN J	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	D	<input type="checkbox"/> Delete
NAME	BEAZER, BRIAN C	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	P	<input type="checkbox"/> Delete
NAME	BOYDSTON, CORY J	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	WEISS, DAVID S	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	FURLOW, MICHAEL H	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD, STE B200	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	S	<input type="checkbox"/> Delete
NAME	DIETZ, TERESA R	
STREET ADDRESS	5775 PEACHTREE DUNWOODY ROAD, STE B200	
CITY-ST-ZIP	DUNWOODY GA 30342	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

Date

Daytime Phone #

CR2E034 (9/01)