

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G53352

1. Entity Name

PREFERRED BUILDERS WARRANTY CORPORATION

Principal Place of Business

5300 DERRY STREET
HARRISBURG PA 17111

Mailing Address

5300 DERRY STREET
HARRISBURG PA 17111

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CT CORPORATION SERVICES
1200 S 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, 2001 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 STD
NAME SHAW, DANNY J
STREET ADDRESS 4700 NW 2ND AVE
CITY-ST-ZIP BOCA RATON FL ☒ Delete

TITLE VPD
NAME YARBOROUGH, HAROLD
STREET ADDRESS 15140 WHETSTONE WAY
CITY-ST-ZIP FT LAUDERDALE FL ☒ Delete

TITLE PD
NAME WAAS, RICHARD
STREET ADDRESS 5582 MW 79TH AVENUE
CITY-ST-ZIP MIAMI FL ☒ Delete

TITLE D
NAME ROBERTSON, JAMES
STREET ADDRESS 1360 NW 33RD STREET
CITY-ST-ZIP POMPANO BEACH FL 33064 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D
NAME George A. Parmer
STREET ADDRESS 911 Grove Road
CITY-ST-ZIP Harrisburg, PA 17111 ☐ Change ☒ Addition

TITLE V/D
NAME Kathleen D. Foley
STREET ADDRESS 2424 East Bayberry Drive
CITY-ST-ZIP Harrisburg, PA 17112 ☐ Change ☒ Addition

TITLE S/T
NAME Thomas M. Thorwart
STREET ADDRESS 6512 Sanibel Drive
CITY-ST-ZIP Harrisburg, PA 17111 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: Kathleen D. Foley, VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01 (717)561-4480

Date Daytime Phone #

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90254 019 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)