


05-05-2003 90717 011 \*\*\*150.00

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

<b>DOCUMENT # G65295</b> 1. Entity Name <b>NADINE HOUSE REALTY, INC.</b>		
Principal Place of Business #1 BREAKERS ROW PALM BCH., FL 33480		Mailing Address #1 BREAKERS ROW PALM BCH., FL 33480
2. Principal Place of Business <b>171 EL PUEBLO WAY</b> Suite, Apt. #, etc.		3. Mailing Address <b>171 EL PUEBLO WAY</b> Suite, Apt. #, etc.
City & State <b>PALM BEACH FL</b> Zip <b>33480</b>		City & State <b>PALM BEACH FL</b> Zip <b>33480</b>
Country <b>USA</b>		Country <b>USA</b>
4. FEI Number <b>59-2388974</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent  HOUSE, NADINE ONE NORTH BREAKERS RD #224 PALM BEACH, FL 33480		7. Name and Address of New Registered Agent  NAME  Street Address (P.O. Box Number is Not Acceptable) <b>171 EL PUEBLO WAY</b>  City <b>PALM BEACH FL</b> Zip <b>33480</b>
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 _____ <small>Signature typed in printed name of registered agent and 203 7 applicable. (NOTE: Registered Agent Signature required when substituting)</small>		
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE VP NAME WORLEY, SCOTT STREET ADDRESS 364 S. COUNTRY CLUB DRIVE CITY-ST-ZIP ATLANTIS, FL 33462	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE D NAME WORLEY, CHRISTINA STREET ADDRESS S. COUNTRY CLUB DRIVE CITY-ST-ZIP ATLANTIS, FL 33462	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>364 S. Country Club Dr</b>
TITLE D NAME WORLEY, MARK STREET ADDRESS 14008 SOUTH 31ST ST CITY-ST-ZIP PHOENIX, AZ	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PST NAME HOUSE, NADINE STREET ADDRESS ONE NORTH BREAKERS ROW CITY-ST-ZIP PALM BEACH, FL 33480	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>171 EL Pueblo Way</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Nadine House</u>		Date: <u>4/29/03</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>		<small>Date</small>

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CHECK HERE IF MAKING CHANGES

CR2004 (10/02)