

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H11294

1. Entity Name
FLORIDA HOMES AND LAND INCORPORATED OF VOLUSIA C

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90037 021 ***150.00

Principal Place of Business

506 N RIDGEWOOD AVE
EDGEWATER FL 32132
US

Mailing Address

204 N RIVERSIDE DR
EDGEWATER FL 32132
US

AUV2418U



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

200 N. Riverside Dr

Suite, Apt. #, etc.

City & State

Edgewater FL 32132

Zip

32132

Country

U.S.

4. FEI Number 59-2428161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAUGHWOUT, LESLIE C
204 N RIVERSIDE DR
EDGEWATER FL 32132

Name

Street Address (P.O. Box Number is Not Acceptable)

200 N. Riverside Dr

City

Edgewater

FL

Zip Code

32132

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME HAUGHWOUT, C. LESLIE
STREET ADDRESS 204 N. RIVERSIDE DR.
CITY-ST-ZIP EDGEWATER FL

TITLE ☒ Change ☐ Addition
NAME 200 N. Riverside Dr.
STREET ADDRESS EDgewater FL 32132
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME HAUGHWOUT, JEAN
STREET ADDRESS 204 N. RIVERSIDE DR.
CITY-ST-ZIP EDGEWATER FL

TITLE ☒ Change ☐ Addition
NAME 200 N. Riverside Dr
STREET ADDRESS EDgewater FL 32132
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME HAUGHWOUT, KENNETH L.
STREET ADDRESS 2204 ROYAL PALM
CITY-ST-ZIP EDGEWATER FL

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

TITLE TD ☐ Delete
NAME HAUGHWOUT, E. ROBERT
STREET ADDRESS 2513 ROYAL PALM DRIVE
CITY-ST-ZIP EDGEWATER FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Leslie C. Haughwout
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/14/2001 (904) 428-1810

CR2E034 (10/00)