

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90474 018 ***150.00

DOCUMENT # H40834

1. Entity Name
LUTZ BUILDERS, INC.



Principal Place of Business
**607 S MAIN ST
SUITE 107
BELLE GLADE FL 33430**

Mailing Address
**607 S MAIN ST
SUITE 107
BELLE GLADE FL 33430**

20005133



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2494388**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**LUTZ, WALLACE K. JR.
721 TABIT ROAD
BELLE GLADE FL 33430**

Name

Lutz, Wallace K. Jr.

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

15975 Meadow Wood Dr.

City

Wellington, FL

FL

Zip Code
33414

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **LUTZ, WALLACE K. JR.**
STREET ADDRESS **721 TABIT ROAD**
CITY-ST-ZIP **BELLE GLADE FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **15975 Meadow Wood Dr.**
CITY-ST-ZIP **Wellington, FL 33414**

TITLE **VP** ☐ Delete
NAME **SNOW, JAMES M. JR.**
STREET ADDRESS **721 TABIT ROAD**
CITY-ST-ZIP **BELLE GLADE FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1148 Stillwell Rd.**
CITY-ST-ZIP **Belle Glade, FL 33430**

TITLE **S** ☐ Delete
NAME **LUTZ, CYNTHIA**
STREET ADDRESS **721 TABIT ROAD**
CITY-ST-ZIP **BELLE GLADE FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **15975 Meadow Wood Dr.**
CITY-ST-ZIP **Wellington, FL 33414**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] SIGNATURE REQUIRED

W.K. Lutz, Jr. President

Date **01-09-03**

Daytime Phone # **561-996-9786**

CR2E034 (10/02)