## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Mar 26, 2001 8:00 am Secretary of State **DOCUMENT # H66785** 1. Entity Name STEELCORE HOMES, INC. 03-26-2001 90011 036 \*\*\*150.00 Mailing Address Principal Place of Business 4668 CENTERGATE BLVD 4668 CENTERGATE BLVD SARASOTA FL 34233 SARASOTA FL 34233 00037545 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State 59-2554944 City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PITTENGER, RICHARD D. Street Address (P.O. Box Number is Not Acceptable) **4668 CENTERGATE BLVD** SARASOTA FL 34233 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition ☐ Delete TITLE TITLE PITTENGER, RICHARD D. NAME **4668 CENTERGATE BLVD** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP Addition Change Delete TITLE TITLE PITTENGER, BONITA F. NAME NAME 4668 CENTERGATE BLVD STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete PITTENGER, KEITH A. NAME NAME - > 4566 SATINLEAF LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Detete TITLE PITTENGER, BARBARA G. NAME NAME 4566 SATINLEAF LANE STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITL F MCCOY, ROBIN L. NAME NAME 2045 TIMUCUA TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NOKOMIS FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE MCCOY, KATHLEEN A. NAME 2045 TIMUCUA TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NOKOMIS FL** CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OPFICER OR DIRECTOR

13. I hereby certify that the information supplied with this filling 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 supplied that 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 of 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 all other like empowered.