Secretary of State 08-27-2002 90119 027 ***550.00					
· • • • 4	,				
DO NOT WRITE IN THIS SPACE					
El Number 59-2597908 Applied For Not Applicable	7				
ertificate of Status Desired \$8.75 Additional Fee Required]				
ame and Address of New Registered Agent					
ox Number is Not Acceptable)					
FL Zip Code					
nt, or both, in the State of Florida. I am familiar with, and accept					
nstakng) DATE	1				
10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees					
OITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	7.				
☐ Change ☐ Addition					
☐ Change ☐ Addition	(
☐ Change ☐ Addition	1				

2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nan	MENT # H7344 HOMES DEVELOPMENT, INC		ì	Aug 27, 2002 8:00 am Secretary of State 08-27-2002 90119 027 ***550.00		
Principal Place 107 HARRISO BELLAIR BEA		Mailing Address 107 HARRISON AVE BELLAIR BEACH FL 34635 US				
2. Principal F	Place of Business	3. Mailing Address				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & Stat	e	City & State	•	4. FEI Number 59-2597908 Applied For Not Applicable		
Zip .	Country	Zip	Country	5. Certificate of Status Desired		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent		
			Name	!		
JONASSEN, WILLIAM S., ESQUIRE 10785 ULMERTON ROAD SOUTHEAST			Street Address (P.O. Box Number is Not Acceptable)			
LARGO F	L 34648					
			City	FL Zip Code		
Tax filing ((See criter	Signature, typed or printed name of registered agent an oration is eligible to satisfy its intangible requirement and elects to do so.	FILE NOW!!! After September 13, 2 Make Check Payable	to Department of Si	50.00 Trust Fund Contribution. S5.00 May Be Added to Fees		
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Frank, ronald 107 Harison Ave Bellair Beach Fl 34635	☐ Delete ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE Name Street address City-St-Zip	S Frank, ronald 107 Harrison Ave Bellair Beach F; 34635	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME Street Address City-St-Zip	* · ·	☐ Delete	TITLE NAME STREET ADDRESS CÎTY-ST-ZÎP	☐ Change ☐ Addition		
TITLE Name Street address City-St-Zip		☐ Celete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	☐ Change ☐ Addition		
TITLE Name Street address City-St-Zip		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME Street Address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
indicated of the cori	on this report or supplemental report is t	rue and accurate and that my vered to execute this report as	signature shall have the	Section 119.07(3)(i), Florida Stàtutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or Block 12 if		

SIGNATURE: 4

SIGNATURE IND TYPED OR PRINTED NAME OF SIGNING OFFICER OF THE CONTROL OF FRANK

727 593 2858