2001 UNIFORM BUSINESS REPORT (UBR)

Feb 06, 2001 8:00 am **DOCUMENT # H86264 Secretary of State** 1. Entity Name DURKIN HOMES, INC. 02-06-2001 90279 004 ***158.75 Principal Place of Business Mailing Address 536 CLUBHOUSE DRIVE 536 CLUBHOUSE DRIVE COUNTRY CLUB VILLAGE, V-8 COUNTRY CLUB VILLAGE, V-8 UUU14747 LAKE WALES FL 33853 LAKE WALES FL 33853 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2611047 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DURKIN, THOMAS W. Street Address (P.O. Box Number is Not Acceptable) V-8 COUNTRY CLUB VILLAGE LAKE WALES FL 33853 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition TITLE Delete TITLE **□** Change Durkin, Thomas W. DURKIN, THOMAS W. NAME NAME 536 Clubhouse Drive **COUNTRY CLUB VILLAGE #V8** STREET ADDRESS STREET ADDRESS Lake Wales, Florida 33853 CITY-ST-ZIP CITY-ST-ZIP LAKE WALES FL Change ☐ Addition TITLE ☐ Delete TITLE GLAUSSER, DAVID R Glausser, David R. NAME NAME COUNTRY CLUB VILLAGE #H-23 STREET ADDRESS 3311 Country Lake Circle STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WALES FL 33853 Lake Wales, Florida 33853 TITLE ☐ Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

3. 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 seport 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 arrattactment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas W. Durkin, President

(863) 676-4572 President 2-2-01

Daytime Phone #