

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90566 021 ***150.00

DOCUMENT # K55831

1. Entity Name

THE ROSE GROUP BUILDERS, INC.



Principal Place of Business

25 OCEAN DUNE CIRCLE
PALM COAST FL 32137

Mailing Address

25 OCEAN DUNE CIRCLE
PALM COAST FL 32137

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2924326

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

40006631



6. Name and Address of Current Registered Agent

ROSENBAUM, STAN
25 OCEAN DUNE CIRCLE
PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name

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

City

FL

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. 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

TITLE PT ☐ Delete
NAME ROSENBAUM, STAN
STREET ADDRESS 25 OCEAN DUNE CIRCLE
CITY-ST-ZIP PALM COAST FL 32137

TITLE VS ☐ Delete
NAME ROSENBAUM, JO ANN
STREET ADDRESS 250 OCEAN DUNE CIRCLE
CITY-ST-ZIP PALM COAST FL 32137

TITLE VP ☐ Delete
NAME ROSSI, ANGELO
STREET ADDRESS 1711 STATE AVE.
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VS ☒ Change ☐ Addition
NAME ROSENBAUM, JO ANN
STREET ADDRESS 25 OCEAN DUNE CIRCLE
CITY-ST-ZIP PALM COAST FL 32137

TITLE VP ☒ Change ☐ Addition
NAME ROSSI, ANGELO
STREET ADDRESS 450 A' PARQUE DR.
CITY-ST-ZIP ORMOND BEACH, FL 32174

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

TITLE ☐ Change ☐ Addition
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STAN ROSENBAUM

1-15-03 386-446-9248

Date

Daytime Phone #

CR2E034 (10/02)