

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K92956

FILED  
Mar 24, 2003  
Secretary of State

Entity Name: GEORGE KAPLER HOMES, INC.

## Current Principal Place of Business:

2801 N NINTH ST  
SAINT AUGUSTINE, FL 32084 US

## New Principal Place of Business:

2825 OLD MOULTRIE ROAD  
SAINT AUGUSTINE, FL 32086 US

## Current Mailing Address:

3501-B N. PONCE DE LEON BLVD  
PMB 367  
SAINT AUGUSTINE, FL 32084

## New Mailing Address:

FEI Number: 59-2966568      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KAPLER, GEORGE  
2801 NORTH NINTH STREET  
ST. AUGUSTINE, FL 32095 US

## Name and Address of New Registered Agent:

KAPLER, GEORGE  
2825 OLD MOULTRIE ROAD  
ST. AUGUSTINE, FL 32086 US

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:

03/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: KAPLER, GEORGE,  
Address: 3501-B N PONCE DE LEON BLVD, STE #367  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: DV ( ) Delete  
Name: ROY, GLYNDA  
Address: 540 WOOD CHASE DR  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: ST ( ) Delete  
Name: ROY, GLYNDA  
Address: 540 WOOD CHASE DR  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: V ( ) Delete  
Name: DOLAN, DAVID W  
Address: PMB 367, 3501-B N PONCE DE LEON BLVD  
City-St-Zip: SAINT AUGUSTINE, FL 32084

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE KAPLER

DP

03/24/2003

Electronic Signature of Signing Officer or Director

Date