

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000003643

FILED
Apr 22, 2003
Secretary of State

Entity Name: RIVER ISLANDS BUILDERS, LLC

Current Principal Place of Business:

4300 CATALFUMO WAY
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4300 CATALFUMO WAY
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0996127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACOBY, JAMES E P.A.
4300 CATALFUMO WAY
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CATALFUMO HOLDINGS P, ARTNERSHIP
Address: 4300 CATALFUMO WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM () Delete
Name: MHD-FLA, INC.,
Address: 8401 WEST DODGE ROAD, SUITE 100
City-St-Zip: OMAHA, NE 68114

Title: MGRM () Delete
Name: DURHAM RESOURCES, LL, C
Address: 8401 WEST DODGE ROAD, SUITE 100
City-St-Zip: OMAHA, NE 68114

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL S. CATALFUMO

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04/22/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date