4/2:

FILED
May 29, 2002 8:00 am
Secretary of State
04-22-2002 90239 016 ****50.00

86703

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2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000003050

1. Entity Name
HOLDER INTERESTS, LLC

Principal Place of Business	Mailing Address
~~520 SOUTH FLAGLER DRIVE~~	~~520 SOUTH FLAGLER DRIVE~~
~~SUITE 11-E~~	~~SUITE 11-E~~
~~WEST PALM BEACH FL 33401~~	~~WEST PALM BEACH FL 33401~~

2. Principal Place of Business	3. Mailing Address
1025 N. Federal Hwy.	1025 N. Federal Hwy.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lake Park, FL	City & State: Lake Park, FL
Zip: 33403 Country:	Zip: 33403 Country:

4. FEI Number 65-1092674 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOLDER, DOUGLAS JR.	Name
~~520 SOUTH FLAGLER DRIVE~~ 1025 N. Federal Hwy	Street Address (P.O. Box Number is Not Acceptable) 1025 N. Federal Hwy.
~~SUITE 11-E~~	
~~WEST PALM BEACH FL 33401~~ Lake Park, FL 33403	City Lake Park, FL Zip Code 33403

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 ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLDER, DOUGLAS JR. ~~520 SOUTH FLAGLER DRIVE~~ ~~WEST PALM BEACH FL 33401~~ ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1025 N. Federal Hwy. Lake Park, FL 33403
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
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (9/01)

11. 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 is true and accurate and that my 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: [signature] - Douglas A. Holder, Jr. 04/12/02 (561) 840-9856 ext. 240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

Attachment

DOCUMENT # L01000009053

Entity Name

ROTTLUND ADVANTAGE, LLC

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2. Principal Place of Business	3. Mailing Address
4902 Eisenhower Blvd.	4902 Eisenhower Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa FL	City & State: Tampa FL
Zip: 33634 Country: USA	Zip: 33634 Country: USA

4. FEI Number: 59-3723831 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: David B. McCain, Esq.

Street Address (P.O. Box Number is Not Acceptable): 700 NW 107 Avenue

City: Miami FL Zip Code: 33172

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable.

FEE $ 550.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE	Member
NAME	Universal American Mortgage Co.
STREET ADDRESS	730 NW 107 Avenue
CITY-ST-ZIP	Miami FL 33172
TITLE	Member
NAME	Rottlund Homes of Florida, Inc.
STREET ADDRESS	2623 McCormick Drive, Ste. 102
CITY-ST-ZIP	Clearwater FL 33759
TITLE	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

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CR2E083B (12/01)

11. 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 is true and accurate and that my 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: Nancy Kaminsky Nancy Kaminsky Supervising Manager 4/1/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #