## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 29, 2002 8:00 am Secretary of State DOCUMENT # L01000018626 04-30-2002 90010 039 \*\*\*\*50.00 1. Entity Name CREATIVE HOMES AND DESIGN. LLC Principal Place of Business Mailing Address 2811 AMSDEN ROAD 2811 AMSDEN ROAD WINTER PARK FL 32782 WINTER PARK FL 32792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 74692 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Callahan, Tina Street Address (P.O. Box Number is Not Acceptable) 5910 BENT OINE DRIVE #308 ORLANDO FL 32822 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) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TITLE ☐ Delate TITLE WILLIAM H. DELETTRE 2811 AMSDEN RD Change ☐ Addition CR2E083 (9/01 NAME NAME STREET ADDRESS STREET ADDRESS WINTER ATRK, FL. CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE -Delete TITLE. □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2ZIP CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI E ☐ Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3XI). 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.

FILED

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