2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

	J.111 J.1111 J.00				- <i>,</i>						
DOCUMENT # L9700000909											
1. Entity Name CENTEX ROONEY/RS&H DESIGN BUILDERS, L.C.					FILE			ILED			
r _e											
Principal Place of Business Mailing Address					2001 JUN -7 AM 10: 57						
6300 NW 5TH		Mailing Address P.O. BOX 199000	-			DIVIS	ION OF	CORPOR	RATIONS		
FT. LAUDERDA		DALLAS TX 75219				TALLAHASSEE, FLORIDA					
2. Principal Pla	ace of Business	3. Mailing Address	Mailing Address			l			1111 BULLI BULLI B		QUID HAIN 100H
	l ala	Suite Act # etc	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
Suite, Apt. 4	ғ, еtс. 	Suite, Apr. #, etc.	Solle, Apt. W. Std.								
City & State		City & State				4. FEI N	umber	58-234122	4	1	plied For t Applicable
Zip Country		Zip	Zip Coun		у		icate of S	tatus Desired		\$5.00 Add	
	6. Name and Address of Current	Registered Agent				7. Name	and Ade	dress of New	<u> </u>		
				Name					- + =	<u> </u>	~
HENDERS 101 E KEN			Street Address (umber is	Not Acceptab	e)			
SUITE 200								- :			
TAMPA FL			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.											
With above hamos chary abbiting and diatometric and perpose of charging to registered amos of registered against a second at the second and the second and the second and the second are second as the second and the se											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
	FEE IS \$	50.00									
	o Departr		f State			i I					
9.	MANAGING MEME	JERS/MEMBERS	10.					ADDITIONS	/CHANGES		
TITLE	MGRM	☐ Delete	TITLE				40		1267	- Change	Addition
NAME OVERET LEGERES	REYNOLDS, SMITH & HILLS, IN: 4651 SALISBURY ROAD, SUITE		NAME STREET ADDRESS			400004367号等 ⁰⁴					
STREET ADDRESS CITY-ST-ZIP	JACKSONVILLE FL 32256	400		-ST-ZIP				未未未来	*\$0.00	冰冰冰冰水	5U.UU
TITLE	MGRM	☐ Delete	TITLE							Change	☐ Addition
NAME STREET ADDRESS					790	1 5W	671	COURT FL 33	· ·		
CITY-ST-ZIP	FT LAUDERDALE FL 33309		CITY	-ST-ZIP			ion,	FL 33	1324		
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CITY-ST-ZIP				r-ST-ZIP	54	eksor	WILL	E, FL	3225	4	
TITLE		☐ Delete	π	E							Addition
NAME	, NAN				Ro	BERTS	ON,	DAVID RY RO,	512 19	3	
STREET ADDRESS CITY-ST-ZIP				eet address (-st-zip	JAC	LESON	VILLE	FL	92256		
TITLE		☐ Delete	TITL			-1 5				Change	Addition
NAME			NAN	AE					16		
STREET-ADDRESS				EET ADDRESS					7		
CITY-ST-ZIP	authorbat the information assaults to the	th this filing does not suplify t		r-ST-ZIP	ted in S	ection 110	07(3\/i) [Florida Statute	s I further ce	rtify that the i	information
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.											er of the

4/20/0) **8/4-98/-5000**Date Daytime Phone #