

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M74055

FILED
Jan 14, 2003
Secretary of State

Entity Name: PRIMAVERA HOMES OF FLORIDA, INC.

Current Principal Place of Business:

4502 S. ATLANTIC AVE.
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

4502 S. ATLANTIC AVE.
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-2885733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZARBO, LOUISE GINA
4502 S. ATLANTIC AVE.
NEW SMYRNA BEACH, FL 32169

Name and Address of New Registered Agent:

ZARBO, LOUISE G
4502 S. ATLANTIC AVE.
NEW SMYRNA BEACH, FL 32169

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: LOUISE G. ZARBO

01/14/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZARBO, SALVATORE,
Address: 4502 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP () Delete
Name: ZARBO, LOUISE GINA,
Address: 4502 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S () Delete
Name: KESHAUJI, GALA
Address: 932 HYER ST
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZARBO, SALVATORE
Address: 4502 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP (X) Change () Addition
Name: ZARBO, LOUISE G
Address: 4502 S. ATLANTIC AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: SALVATORE ZARBO

P

01/14/2003

Electronic Signature of Signing Officer or Director

Date