FILED

2002 UNIFORM BUSINESS REPORT (UBR)

2002 ONIFORM DOSINESS REPORT (ODA)							Jan 23, 2002 8:00 am			
DOCUMENT # M89214 1. Entity Name WAF HOMES, INC.							Secretary 01-23-2002 9009	y of Sta	ate	
Principal Place 856 CAPE CO CAPE CORAL US	ORAL PKWY	s	Mailing Address 856 CAPE CORAL PKWY. CAPE CORAL FL 33904 US				: 1001000	1/1// 1/1// 1/1// 1/1// 1/1// 1/1//	(8) 8) 8) 18	
Principal Place of Business A Mailing Address										
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN T	HIS SPACE		
City & Stat	أنو		City & State	City & Staté			El Number 65-007 1629	<u> </u>	plied For	
Zip Country			Zip Country		itry	5. (Certificate of Status Desired	\$8.75 Add	litional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
o. Harin and Address of Content nagistered Agent					Name					
FITCH, WAYNE A.					Street Address (P.O. Box Number is Not Acceptable)					
856 CAPE CORAL PKWY					<u> </u>			-		
CAPE CORAL FL 33904										
					City	FL Zip Code				
8. The above	named entit	y submits this statement for	the purpose of changing its	egister	ed office or	registered ag	ent, or both, in the State of Florida.			
				•		· ·			1	
SIGNATURE	Signature, typed	or printed name of registered agent a	nd title if applicable. (NOTE:	Registere	d Agent signatu	re required when re	sinstating) D.	ATE		
							T	•		
			After May 1, 200	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Star			10. Election Campaign Financing Trust Fund Contribution.	+0.0	May Be to Fees	
	,			12.	оранинон		DETICANO (OLIANICEO TO OFFICERO	AND DIDECTOR		
11.						AD.	DITIONS/CHANGES TO OFFICERS	·		
NAME STREET ADDRESS CITY-ST-ZIP	PD FITCH, W 3611 S.W CAPE CO	. 6TH AVE.	Į.					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FITCH, M 3611 S.W CAPE CO	. 6th ave.	☐ Delete	и -				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDS LEASE, JI 856 CAPE CAPE CO	CORAL PKWY	Delete	Ш			The second Control of	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, CONNIE E CORAL PKWY RAL FL	□ Celete	II				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		BREGG E CORAL PKWY RAL FL 33904	☐ Delete	11				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	- 11	I			☐ Change	☐ Addition	

13. 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 or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/02 941-549-6382