## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400000194

Address:

City-St-Zip:

4019 NW 76 AVENUE

CORAL SPRINGS, FL 33065

FILED Feb 26, 2008 Secretary of State

| Entity Na                                     | me: UCP, INC                    | D.                             |  |   |
|---|---------------------------------|--------------------------------|--|---|
| Current Principal Place of Business:          |                                 |                                | New Principal Place of Business:             |   |
|   | 76 AVENUE<br>PRINGS, FL 3       | 33065                          |  |   |
| Current Mailing Address:                      |                                 |                                | New Mailing Address:                         |   |
|   | 76 AVENUE<br>PRINGS, FL 3       | 33065                          |  |   |
| FEI Number                                    | : 59-3776679                    | FEI Number Applied For ( )     | FEI Number Not Applicable ( )                | Certificate of Status Desired ( )       |
| Name and Address of Current Registered Agent: |                                 |                                | Name and Address of New Registered Agent:    |   |
| 395 NW 1                                      | USTIN A JR.<br>73RD. STREE      | Т                              |  |   |
| 137<br>MIAMI, FL                              | 33169 US                        |                                |  |   |
|   | e named entity<br>e of Florida. | submits this statement for the | purpose of changing its registere            | ed office or registered agent, or both, |
| SIGNATU                                       |                                 |                                |  |   |
|   | Electro                         | nic Signature of Registered Ag | ent  | Date                                    |
| OFFICERS AND DIRECTORS:                       |                                 |                                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |   |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | HOOKER, STE<br>4019 NW 76 A     |                                | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                 |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | LEWIN, AUSTI                    | D. STREET APT. # 137           | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                 |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | LEWIN, GREG<br>4019 NW 76 A     |                                | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                 |
| Title:<br>Name:                               | TRES (<br>SLOAN, GUY            | ) Delete<br>JR.                | Title:<br>Name:                              | ( ) Change ( ) Addition                 |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: STEVE R HOOKER SR Ρ 02/26/2008