

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N09656**

1. Entity Name

B & H GROUP HOMES, INC.**FILED**
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90012 008 ****61.25

Principal Place of Business

6465 - 32ND AVENUE NORTH
ST. PETERSBURG FL 33710
US

Mailing Address

P.O. BOX 14072
ST. PETERSBURG FL 33733
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2561561**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDREWS, LANCE, ESQ.
2828 66TH TERRACE
111 - 2ND AVE NE
ST. PETERSBURG FL 33712

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
SCHNEIDER, ROBERT L.
12003 96TH PL N
SEMINOLE FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
SCHNEIDER, MARION L.
6465-32 AVE.,N.
ST. PETERSBURG FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
SCHNEIDER, HELEN J.
6465-32 AVE.,N.
ST. PETERSBURG FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
GRIZZEL, TERESA L.
6770 32 AVE N
ST. PETERSBURG FL ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
830-118TH TERR N
ST PETERSBURG FL 33716TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HELEN SCHNEIDER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-19-01

727-327-1019

CR2E037 (10/00)