

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90268 001 ***122.50

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1. Entity Name

SWEET HOME COMMUNITY BUILDERS, INC.

Principal Place of Business

Mailing Address

17201 S.W. 103RD AVENUE
 MIAMI FL 33157

17201 S.W. 103RD AVENUE
 MIAMI FL 33157

10579



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0858670

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

HOWARD, BARBARA A
9456 S.W. 164TH COURT
MIAMI FL 33196

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 \$61.25

9. 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	P	<input type="checkbox"/> Delete
NAME	RICHARDSON, WALTER T	
STREET ADDRESS	7993 S.W. 187TH STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOWARD, BARBARA	
STREET ADDRESS	9456 S.W. 164TH COURT	
CITY-ST-ZIP	MIAMI FL 33196	
TITLE	D	<input type="checkbox"/> Delete
NAME	KNOX, GEORGE	
STREET ADDRESS	3863 S.W. DOUGLAS ROAD	
CITY-ST-ZIP	HOLLYWOOD FL 33029	
TITLE	D	<input type="checkbox"/> Delete
NAME	MITCHELL, INEZ	
STREET ADDRESS	17924 N.W. 10TH STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33029	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOWARD, SAM	
STREET ADDRESS	19755 S.W. 135TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33177	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIS, CINDY R	
STREET ADDRESS	1 FINANCIAL PLAZA 100 SE 3RD AVE, STE 1200	
CITY-ST-ZIP	FT LAUDERDALE FL 33394	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	Miami, FL	
CITY-ST-ZIP	33133	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter T. Richardson 1/10/2001 305-251-5753

Date Daytime Phone #

CR2E037 (9/01)