

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PO00000009647**

APPROVED AND FILED

Entity Name
NEW HOMES "R" Us Realty, Inc.

01 MAY 21 PM 3:58

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business
**6850 LONE STAR TRD. #1
JACKSONVILLE, FL
32241-6064**

Mailing Address
**P.O. Box 56064
Jacksonville, FL 32241-6064**

Principal Place of Business
3780 KORI RD.

3. Mailing Address
Suite, Apt. #, etc.
6

City & State
JACKSONVILLE FL

City & State
JACKSONVILLE FL

4. FEI Number
59-3644203

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

6. Name and Address of Current Registered Agent
**CT Corporation System
1200 S. Pine Island Rd.
Plantation, FL 33324**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
**600004430376--D
-06/19/01--01092--002**
City
*****558.75 FL ***558.75**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! SEE US TODAY
THRU MAY 1, 2001. Fee will be \$50.00
More Charge Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

| 1. OFFICERS AND DIRECTORS | |
|---|--|
| FILE NAME REET ADDRESS TY-ST-ZIP | Director <input checked="" type="checkbox"/> Delete Charlotte J. Braithwaite 5326 Camelot Forest Dr. Jacksonville, FL 32258 |
| FILE NAME REET ADDRESS TY-ST-ZIP | <input type="checkbox"/> Delete |
| FILE NAME REET ADDRESS TY-ST-ZIP | <input type="checkbox"/> Delete |
| FILE NAME REET ADDRESS TY-ST-ZIP | <input type="checkbox"/> Delete |
| FILE NAME REET ADDRESS TY-ST-ZIP | <input type="checkbox"/> Delete |
| FILE NAME REET ADDRESS TY-ST-ZIP | <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT Braithwaite <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Braithwaite, Daniel T. 5326 Camelot Forest Dr. Jacksonville, FL 32258 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Directore Marie <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Constance Marie Braithwaite 3801 Windridge Crt. Jacksonville, FL 32257 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: **Daniel T. Braithwaite** 5/18/01