

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000046661

1. Entity Name
FLORIDA HOMES & VILLAS, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90315 044 ***150.00

Principal Place of Business
8520 BLUE HORIZON COURT
KISSIMMEE FL 34747

Mailing Address
8520 BLUE HORIZON COURT
KISSIMMEE FL 34747

2. Principal Place of Business
4620 CUMBERLAND LANE DRIVE
Suite, Apt. #, etc.

3. Mailing Address
4620 CUMBERLAND LANE DRIVE
Suite, Apt. #, etc.

City & State
KISSIMMEE FL

City & State
KISSIMMEE FL

4. FEI Number
59 3653721

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

6. Name and Address of Current Registered Agent
WORRALL, MARION
8520 BLUE HORIZON COURT
KISSIMMEE FL 34747

7. Name and Address of New Registered Agent
Name
WORRALL, MARION
Street Address (P.O. Box Number is Not Acceptable)
4620 CUMBERLAND LANE DRIVE
City
KISSIMMEE FL Zip Code
34746

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 Marion Worral Marion Worral 4/13/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WORRALL, NIGEL 8520 BLUE HORIZON COURT KISSIMMEE FL 34747 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD WORRALL, MARION 8520 BLUE HORIZON COURT KISSIMMEE FL 34747 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WORRALL, NIGEL 4620 CUMBERLAND LANE DRIVE KISSIMMEE FL 34746 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD WORRALL, MARION 4620 CUMBERLAND LANE DRIVE KISSIMMEE FL 34746 <input checked="" 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
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

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: Marion Worral Marion Worral 4/13/01 407 870 7341
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)