

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000078402

1. Entity Name

AFFORDABLE DEVELOPMENT GROUP, INC.

FILED

May 11, 2001 8:00 am  
Secretary of State

05-11-2001 90449 036 \*\*\*158.75

Principal Place of Business

928 SYCAMORE STREET  
DAYTONA BEACH FL 32114

Mailing Address

928 SYCAMORE STREET  
DAYTONA BEACH FL 32114

2. Principal Place of Business

847 ORANGE AVE

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

SUITE 1A

Suite, Apt. #, etc.

City & State

FL

City & State

DAYTONA BCH, FL

Zip

32114

Country

USA

Zip

Country

4. FEI Number

59-3116205

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUGER, THOMAS A  
928 SYCAMORE STREET  
DAYTONA BEACH FL 32114

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

*Thomas A. Huger*

THOMAS A. HUGER

30 Apr 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME VD  
STREET ADDRESS HUGER, LINDA  
CITY-ST-ZIP 928 SYCAMORE STREET  
DAYTONA BEACH FL 32114

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME P  
STREET ADDRESS HUGER, THOMAS A  
CITY-ST-ZIP 928 SYCAMORE STREET  
DAYTONA BEACH FL 32114

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Thomas A. Huger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

30 Apr 01

Date

Daytime Phone #

(904) 238-0414

CR2E034 (10/00)