2002 UNIFORM BUSINESS REPORT (UBR)

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Aug 04, 2003 8:00 am Secretary of State P00000115880 07-07-2003 90306 021 ***150.00

DOCUMENT # 1. Entity Name TAYLORWOOD HOMES INC. Principal Place of Business Mailing Address **-22033133** 3624 LINKWOOD ST 3624 LINKWOOD ST **NEW PORT RICHEY FL 34652** NEW PORT RICHEY FL 34652 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Ζiρ Country \$8.75 Additional 5. Certificate of Status Desire 6. Name and Address of Current Registered Agent Name YOUNG, MARGARET Street Address (P.O. Box Number is Not Acceptable) 3624 LINKWOOD ST **NEW PORT RICHEY FL 34652** 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, typed or printed name of registered agent and side if appaicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election. Campaign Financing -\$5.00 May Be Tax filling requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE ☐ Addition ☐ Change (<u>9</u> NAME Young, Martha Jane M Mrs. NAME STREET ADDRESS 27 CRANBERRY LANE STHEET ADDRESS CITY-ST-ZIP **AURORA ON L4G 5-Y2** CITY-ST-ZIP ☐ Addition TITLE ☐ Deleta TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Chance ☐ Addition MALIF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-CITY-ST-ZIP TITLE ☐ Delete ITTLE MALLE NAME STREET ADDRESS STREET ADDRESS CLTY-ST-ZIP CITY-ST-ZUP TITLE Change Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deleta ME Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-719

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.



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FLORIDA DEPARTMENT OF STATE

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Secretary of State

July 8, 2003

TAYLORWOOD HOMES INC. 3624 LINKWOOD ST NEW PORT RICHEY, FL 34652

Subject: TAYLORWOOD HOMES INC.

-Reference-Number:-/

-P00000115880-

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Because our records reflect the above referenced entity previously applied for its Federal Employer Identification (FEI) Number, it must now include its FEI number on the annual report/uniform business report or attach a photocopy of the FEI number application to the document before we can complete your filing.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056.

/al ANNUAL REPORTS SECTION