

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90183 015 ***150.00

DOCUMENT #9

1. Entity Name

P01000027053
Number One Homes of Florida, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. Box 350479
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 350479
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Palm Coast, FL

City & State

Palm Coast, FL

4. FEI Number

59-3703479

Applied for

Not Applicable

Zip

32135-2411

County

Flagler

Zip

32135-0479

County

Flagler

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Donald W. Duncan, P.A.

Street Address (P.O. Box Number is Not Acceptable)

21 Old Kings Road North, B-110

City

Palm Coast

FL

Zip Code

32137

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]

Signature, typed or printed name of registered agent, and that it is acceptable.

(NOTE: Registered Agent signature required when certifying)

DATE

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

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
P.D. Snow, Sr.
STREET ADDRESS
P.O. Box 350479
CITY-STATE-ZIP
Palm Coast, FL 32135-0479

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
Bernard F. Peitzykowski
STREET ADDRESS
P.O. Box 350479
CITY-STATE-ZIP
Palm Coast, FL 32135-0479

TITLE
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STREET ADDRESS
CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034B (12/01)

Attachment

PO 10000 27053

NUMBER ONE HOMES OF FLORIDA, INC.

Post Office Box 350479
Palm Coast, Florida 32135-0479
(386) 447-8901

123684

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

~~Re: Uniform Business Report~~

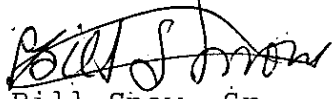
To Whom It May Concern:

Enclosed is the Uniform Business Report for 2002 and a check in the amount of \$150.00 payable to Department of State. My Accountant called to my attention that my report for this year had not been filed. This corporation was formed in 2001 and I was not aware of the report and according to my files and memory, I did not receive the report from you.

Based on this, I request that any penalty be waived since, for some reason, the report request was not sent to me or was sent to an incorrect address. The enclosed form was retrieved from your Department by my Attorney via his computer.

Assessing a penalty to me for a report I never received just is not justified and I respectfully request that any penalty be waived. Thank you for your consideration.

Very truly yours,

 SR
Bill Snow, Sr.
President

BS
Enclosures