

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90470 026 \*\*\*158.75

**DOCUMENT # P01000039275**

1. Entity Name

HOMES 4 SALE D. C., INC.



Principal Place of Business

2629 RIDGECREST AVE.

ORANGE PARK FL 32065

Mailing Address

2629 RIDGECREST AVE.

ORANGE PARK FL 32065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3712288

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DONALD W. DUNCAN, P.A.

25 FLORIDA PARK DR. NORTH

PALM COAST FL 32137

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
D  
CARROLL, DENISE  
2629 RIDGECREST AVE.  
ORANGE PARK FL 32065  
☐ Delete

TITLE  
NAME  
Vice President  
Judy K Murphy  
2629 Ridgcrest Av  
Orange PK FL 32065  
☐ Change ☒ Addition

TITLE  
NAME  
  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
Treasurer  
Thomas Carroll III  
11335 Rustic Pines Circle East  
Jacksonville FL 32257  
☐ Change ☒ Addition

TITLE  
NAME  
  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
Secretary  
Tammy J Binkley  
1574 Beecher La  
Orange Park FL 32073  
☐ Change ☒ Addition

TITLE  
NAME  
  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

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

TITLE  
NAME  
  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

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

TITLE  
NAME  
  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
Denise Carroll

Date

Daytime Phone #

1-4-03

(904) 349-0034

CR2E034 (10/02)