

FILED
May 21, 2002 8:00 am
Secretary of State

04-11-2002 90034 034 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000041330

1. Entity Name
HOME BUYERS APPROVED, INC.

Principal Place of Business 7651-A ASHLEY PARK CT., STE. 401 ORLANDO FL 32835	Mailing Address 7651-A ASHLEY PARK CT., STE. 401 ORLANDO FL 32835
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

4. FEI Number 59-3749765	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NORRIS, RICHARD W ESQ 7651-A ASHLEY PARK CT., STE. 401 ORLANDO FL 32835	7. Name and Address of New Registered Agent Name: Donna J. Norris Street Address (P.O. Box Number is Not Acceptable): 7651-A Ashley Park Ct. Suite 401 City: Orlando FL Zip Code: 32835
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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: _____ (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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	<input type="checkbox"/> Delete NORRIS, RICHARD W 7651-A ASHLEY PARK CT., STE. 401 ORLANDO FL 32835	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE DP	<input type="checkbox"/> Delete NORRIS, DONNA J 7651-A ASHLEY PARK CT., STE. 401 ORLANDO FL 32835	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<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: *Richard W. Norris* **Richard W. Norris** *3/27/02* **3/27/02** *407 299 8096* **407 299 8096**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)