2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000041369

Entity Name: CREATIVE CHOICE HOMES XXVI INC.

FILED Jan 15, 2003 Secretary of State

Littly Nai	IIIe. CREATIV	E CHOICE HOWLS /	CVI, INC.					
Current Principal Place of Business:				New Principal Place of Business:				
4243-D NO	ATIVE CHOICE DRTHLAKE BL ACH GARDEN	VD.						
Current Mailing Address:				New Mailing Address:				
4243-D NO	ATIVE CHOICE DRTHLAKE BL ACH GARDEN	.VD.						
FEI Number:	: 65-1096511	FEI Number Applied F	For () FEI Num	nber Not Appl	icable ()	Certificate of S	tatus Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
BARTO, DILIP 4243 NORTHLAKE BVLD., STE. D PALM BEACH GARDENS, FL 33410 US				BAROT, DILIP 4243 NORTHLAKE BVLD., STE. D PALM BEACH GARDENS, FL 33410 US				
	named entity see of Florida.	submits this statemen	t for the purpose o	f changing i	ts registered	office or registe	red agent, or both,	
SIGNATURE: DILIP BAROT				01/15/2003				
	Electror	ic Signature of Regis	tered Agent			Date		
Election Car	npaign Financing	g Trust Fund Contributio	n ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	BAROT, DILIP 4243 NORTHLA	Delete AKE BVLD., STE. D GARDENS, FL 33410		Title: Name: Address: City-St-Zip:	() Change ()Addi	tion	
Title: Name: Address: City-St-Zip:	WEIR, JOHN F 4243 NORTHLA	Delete AKE BVLD., STE. D GARDENS, FL 33410		Title: Name: Address: City-St-Zip:	WEIR, JOHN F 4243 NORTHL	K) Change ()Addi = .AKE BVLD., STE. GARDENS, FL 33	D	
Title: Name: Address: City-St-Zip:	WHEAT, TIMOT 4243 NORTHLA) Delete THY P AKE BVLD., STE. D GARDENS, FL 33410		Title: Name: Address: City-St-Zip:	() Change ()Addi	tion	
Title: Name:	S () KAKKAR, YASH) Delete HPAL		Title: Name:	() Change ()Addi	tion	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: YASH PAL KAKKAR S 01/15/2003

4243 NORTHLAKE BVLD., STE. D

PALM BEACH GARDENS, FL 33410

Address:

City-St-Zip: