2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100073013 1. Entity Name CREATIVE CHOICE HOMES XXVII, INC. ARLCO					FILED 02 FEB 21 PM 5: 07 SEGRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Address					יאננ	AHASSEE, FL	ORIDA"		
	HLAKE BOULEVARD GARDENS FL 33410	4243-d Northlake Boulevard Palm Beach Gardens FL 33410					Мод		
2. Principal Pl	lace of Business	3. Mailing Address	. Mailing Address			\$ \$!! !!!! !!!! ! !!! !	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Numbe 1129	1939	<u> </u>	oplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of Status E	Desired	\$8.75 Add Fee Required		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
BAROT, DILIP				Street Address (P.O. Box Number is Not Acceptable)					
4243 NORTHLAKE BLVD., SUITE D				Street Address (F.O. Dox Number is Not Acceptable)					
PALM BEACH GARDENS FL 33410			City				Zip Code		
	de di Aldreine		City			FL	<u> </u>	<i>3</i>	
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, typed or printed name of registered agent an	d title if applicable. (NOTE: F	Registered Agent sig	gnature required w	hen reinstating)	DATE			
9. This corpo	eration is eligible to satisfy its Intangible	FILE NOW!!!	FEE IS \$15	50.00	10. Election Cam	naign Financing		0 May Be	
* Tax filing requirement and elects to do so. After May 1, 200 Make Check Payabl					Trust Fund Co			to Fees	
11.	OFFICERS AND D	<u> </u>	12.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTORS	3 IN 11	
TITLE NAME	PD Barot, Dilip	☐ Delete	TITLE NAME				Change	☐ Addition	
STREET ADDRESS	4243-D NORTHLAKE BOULEVARD		STREET ADDRES	ss					
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341 V	Delete	CITY-ST-ZIP TITLE	-				Addition	
NAME.	WEIR, JOHN F SR.		NAME		7000)05022)2/26/02(4	
STREET ADDRESS CITY-ST-ZIP	4243-D NORTHLAKE BOULEVARD PALM BEACH GARDENS FL 3341		STREET ADDRES	SS	-[}	32/26/U2l ****158.75	J1U79U 19****19	ль 58.75—1	
TITLE	V	☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS	WHEAT, TIMOTHY P 4243 NORTHLAKE BLVD.		NAME STREET ADDRES	29					
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341	0	CITY-ST-ZIP						
TITLE	S WANNAD WACII DAI	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	KAKKAR, YASH PAL 4243 NORTHLAKE BLVD.		NAME STREET ADDRES	ss					
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341		CITY-ST-ZIP			_A-			
TITLE NAME		☐ Delete	TITLE NAME				Change	☐ Addition	
STREET ADDRESS			STREET ADDRES	ss					
CITY-ST-ZIP		☐ Delete	CITY-ST-ZIP				Change	☐ Addition	
TITLE NAME		□ Delete	NAME				L_I change	Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	SS					
13. i hereby d	certify that the information supplied with t on this report or supplemental report is t	his filing does not qualify for it rue and accurate and that my	he exemption	tated in Sec have the sa	tion 119.07(3)(i), Florida Same legal effect as if mad	Statutes. I further ce le under oath; that I	ertify that the in am an officer	nformation or director	
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 1/17/02 (561) 627-7988									
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER/OR DIRECTOR Date Date Date Daylime Phone #									