2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000039948

Entity Name: TOUCHTON FAMILY HOMES INC

FILED Jan 14, 2003 Secretary of State

Entity Name:	TOUCHTON FAMILY HOMES, INC.	
Current Princip	oal Place of Business:	New Principal Place of Business:
5030 SO. HILLS LECANTO, FL		
Current Mailing Address:		New Mailing Address:
5030 SO. HILLS LECANTO, FL :		
FEI Number: 01-06	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Add	ress of Current Registered Agent:	Name and Address of New Registered Agent:
TOUCHTON, C. 5030 SO. HILLS LECANTO, FL.,	PT.	TOUCHTON, CARL J 5030 SO. HILLS PT. LECANTO, FL., FL 34461 US
The above name in the State of Fl		ne purpose of changing its registered office or registered agent, or both,
SIGNATURE: 0	CARL TOUCHTON	01/14/2003
_	Electronic Signature of Registered	Agent Date
Election Campaigr	n Financing Trust Fund Contribution (). D DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	() Delete	Title: STD () Change (X) Addition Name: TOUCHTON, KAREN S STD Address: 5030 SO. HILLS PT. City-St-Zip: LECANTO, FL 34461 US
Title: Name: Address: City-St-Zip:	() Delete	Title: PCD () Change (X) Addition Name: TOUCHTON, CARL J PCD Address: 5030 SO. HILLS PT City-St-Zip: LECANTO, FL 34461 US
Title: Name: Address: City-St-Zip:	() Delete	Title: VD () Change (X) Addition Name: TOUCHTON, BART E VD Address: 5030 SO. HILLS PT. City-St-Zip: LECANTO, FL 34461 US
Title: Name: Address: City-St-Zip:	() Delete	Title: VD () Change (X) Addition Name: TOUCHTON, BRET A VD Address: 2941 W. GLEN ST. City-St-Zip: LECANTO, FL 34461 US

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.

SIGNATURE: KAREN TOUCHTON STD 01/14/2003