## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000075440

Entity Name: CARLEY HOMES OF THE TREASURE COAST, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Gurrent Frincipal Flace of Business.	New Fillicipal Flace of Busiless.

5041 NW 112TH DR 3801 SW COQUINA COVE WAY CORAL SPRINGS, FL 33076

#105

PALM CITY, FL 34990

**Current Mailing Address: New Mailing Address:** 

PO BOX 2269 5041 NW 112TH DR

CORAL SPRINGS, FL 33076 PALM CITY, FL 34991 US

FEI Number: 51-0420814 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FELDSTEEN, LEIGH N FELDSTEEN, LEIGH N 5041 NW 112TH DR 3801 SW COQUINA COVE WAY CORAL SPRINGS, FL 33076 US #105

PALM CITY, FL 34990 US

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: 04/30/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

FELDSTEEN, LEIGH N FELDSTEEN, LEIGH N Name: Name:

5041 NW 112TH DR 3801 SW COQUINA COVE WAY #105 Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: PALM CITY, FL 34990

Title: () Delete Title: (X) Change ( ) Addition

FELDSTEEN, CARLA FELDSTEEN, CARLA Name: Name:

5041 NW 112TH DR Address: 3801 SW COQUINA COVE WAY #105 Address:

CORAL SPRINGS, FL 33076 PALM CITY, FL 34990 City-St-Zip: City-St-Zip:

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 Statutés. 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: LEIGH N FELDSTEEN 04/30/2003 D