

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90389 046 ***158.75

DOCUMENT # P92000010892

1. Entity Name
AMERICA'S PREFERRED HOMES, INC.



Principal Place of Business
**950 NORTH ORLANDO AVENUE
SUITE 120
WINTER PARK FL 32789
US**

Mailing Address
**P.O. BOX 4961
ORLANDO FL 32802-4961**

2. Principal Place of Business
310 WAYMONT COURT

3. Mailing Address

Suite, Apt. #, etc.
SUITE 104

Suite, Apt. #, etc.

City & State
LAKE MARY FL

City & State

Zip
32746 Country
USA

Zip Country

4. FEI Number
59-3153771

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**B & C CORPORATE SERVICES OF CENTRAL FL
390 N. ORANGE AVE., SUITE 1100
ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **PALMER, CHARLES B**
STREET ADDRESS **950 N. ORLANDO AVE., SUITE 120**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **310 WAYMONT COURT** ☒ Change ☐ Addition
NAME **LAKE MARY, FL 32746**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **BOBINCHUCK, ROBERT M**
STREET ADDRESS **701 BRAZOS STREET, SUITE 900**
CITY-ST-ZIP **AUSTIN TX 78701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPS** ☒ Delete
NAME **KENT, MARK**
STREET ADDRESS **701 BRAZOS STREET, SUITE 900**
CITY-ST-ZIP **AUSTIN TX 78701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ Delete
NAME **PERRONE, PRESTON I**
STREET ADDRESS **950 N. ORLANDO AVE., STE 120**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **310 WAYMONT COURT** ☒ Change ☐ Addition
NAME **LAKE MARY FL 32746**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.

SIGNATURE: **Preston I. Perrone**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **3/28/03** Daytime Phone # **407-350-625-4544**

CR2E034 (10/02)