2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 03, 2001 08:00 AM DOCUMENT # P9300026131 1. Entity Name **Secretary of State** AR CUSTOM HOMES, INC. Principal Place of Business Mailing Address 13922 58TH STREET NORTH 13922 58TH STREET NORTH CLEARWATER FL CLEARWATER FL33760 33760 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3181134 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARTON LORI 13922 58TH ST N Street Address (P.O. Box Number is Not Acceptable) CLEARWATER FL33760 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. SIGNATURE 01/03/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DVP TITLE CR2E034 (11/00) ☐ Delete TITLE X Change ☐ Addition THORNTON MAME .ПМ NAME THORNTON ЛΜ 1695 SE INDIAN STREET STREET ADDRESS STREET ADDRESS 2955 PINEDA CAUSEWAY, STE. 101 CITY-ST-ZIP STUART FL 34997 CITY-ST-ZIP MELBOURNE 32940 DVP ☐ Delete TITLE ☐ Change NAME BEASLEY WILLIAM JR. NAME STREET ADDRESS 130 PROFESSIONAL DRIVE SUITE 130-B STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP X Delete TITLE ☐ Change ☐ Addition WINGERT JOSEPH NAME STREET ADDRESS 355 BAYTREE DRIVE STREET ADDRESS CITY-ST-ZIP MELBOURNE 32940 CITY-ST-ZIP ☐ Delete TITLE DVP **X** Change ☐ Addition SWEET ROBIN NAME ROONEY JOHN STREET ADDRESS 780 CARRIAGE LANE STREET ADDRESS 1695 SE INDIAN ST CITY-ST-ZIP MERRITT ISLAND 32952 CITY-ST-ZIP STHART 34997 FL. TITLE Delete TITLE ☐ Change ☐ Addition GARTON LORI NAME STREET ADDRESS 13922 58TH ST NORTH STREET ADDRESS CITY-ST-ZIP CLEARWATER 33760 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition RUTENBERG ARTHUR NAME RUTENBERG STREET ADDRESS 13922 58TH ST. NORTH STREET ADDRESS 13922 58TH ST. NORTH CITY-ST-ZIP CLEARWATER 34620 CITY-ST-ZIP CLEARWATER 33760 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

01/03/2001

Daytime Phone #

Date

SIGNATURE: _LORI A GARTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR