## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : ARTHUR RUTENBERG HOMES, INC.

Account Number : I19990000136 Phone

: (727)536-5900 Fax Number

: (727)538-9089

REGISTERED AGENT CHANGE

AR CUSTOM HOMES, INC.

03 JUL -9 PH 1: 49

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to th	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
this statement o	of change is submitted for a corporation organized under the laws of the State of
Florida	in order to change its registered office or registered agent, or both, in the State
of Florida.	
1. The name of	the corporation: AR Custom Homes, Inc.
2. The principa	d office address: 13922 58th Street North, Clearwater, FL 33760
3 The mailing	address (if different):
<b>-</b>	
4. Date of inco	rporation/qualification: 4/9/1993 Document number: P93000028131
	address (if different):  address (if different):  poration/qualification: 4/9/1993  Document number: P93000026131  address of the current registered agent and registered office on file with the artment of State:
	Ronald G. Graiz
	13922 58th Street North
	Clearwater, FL 33760
<ol> <li>The name a changed);</li> </ol>	and street address of the new registered agent (if changed) and /or registered office (if
viziti 80 G) (	Frederick Bennett
	13922 58th Street North
	(P.O. Box or personal mailbox NOT acceptable)
	Clearwater, FL 33760
	ress of its registered office and the street address of the business office of its registered ged will be identical.
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so the hoard, or the corporation has been notified in writing of the change.
Signature of the purior	Frederick Bennett, Treasurer  2. chairman or vice thauction of the pourt)  (Printed or Price units and type)
I hereby accep I further agree performance o registered agei office address,	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete f my duites, and I am familiar with and accept the obligation of my position as nt. Or, if this document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7/9/03
·	Signature of Registered Agent
If signing on boha	lif of an entity:
(	Typed or Printed Name) (Capacity)

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314