

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000070846

1. Entity Name
HOMETOWN BUILDERS, INC.



Principal Place of Business
2475 JEN DRIVE
UNIT 1
MELBOURNE, FL 32940 US

Mailing Address
2475 JEN DRIVE
UNIT 1
MELBOURNE, FL 32940 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
59-3207941

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LANGE, KRIS M
2475 JEN DRIVE
UNIT 1
MELBOURNE, FL 32940

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

Kris Lange

11-21-03

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399-0001

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
DPS	LANGE, TERRY L	306 HIGHWAY A1A #10	SATELLITE BEACH, FL 32937	☐
DVPT	LANGE, KRIS M	306 HIGHWAY A1A #10	SATELLITE BEACH, FL 32937	☐
				☐
				☐
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☒ Change ☐ Addition
DP		3185 SOUTH A1A	MELBOURNE BEACH, FL. 32951	☒
DST		3185 SOUTH A1A	MELBOURNE BEACH, FL. 32951	☒
VP	DAVID BEATTIE	4882 NATURES HOLLOW WAY N.	JACKSONVILLE, FL. 32217	☒
		800024984938	11/24/03--01111--002 **61.25	☐
				☐
				☐

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 empowered.

SIGNATURE:

Kris Lange

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-21-03 (321) 253-8038

Date

Daytime Phone #

CR2E034 (10/02)