2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P93000082414** FILED 1. Entity Name 00 AUG -2 PM 2: 31 CREATIVE CHOICE HOMES VII, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4243 D. NORTHLAKE BLVD. 4243 D. NORTHLAKE BLVD. PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0460361 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BAROT, DILIP Street Address (P.O. Box Number is Not Acceptable) 4243 NORTHLAKE BLVD. SUITE D PALM BEACH GARDENS FL 33410 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable GYID FILE NOWIL! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Change ☐ Addition SVP TITLE ☐ Delete TITLE NAME WEIR. JOHN F NAME STREET ADDRESS STREET ADDRESS 4243-D NORTHLAKE BLVD. CITY-ST-ZIP CITY-ST-ZIP <u>400003349734--- 4</u> PALM BEACH GARDENS FL -08/08/00--010EMange 02E Addition Delete TITLE ****158.75 ****158.75 NAME WHEAT, TIMOTHY P NAME STREET ADDRESS 4243-D NORTHLAKE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL ☐ Addition Delete TITLE TITLE NAME NAME LANCZI, ANITRA D STREET ADDRESS STREET ADDRESS 4243-D NORTHLAKE BLVD. Gardens, FL 33410 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL Delete TITLE DTP TITLE NAME NAME BAROT, DILIP STREET ADDRESS STREET ADDRESS 4243-D NORTHLAKE BLVD. CITY-ST-ZIP CITY-ST-7IP PALM BEACH GARDENS FL 33410 Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 yustee empore to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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of the corporation or the receiver or vustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block changed, or on an attachment with in address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING CASTOCKE ON DIRECTOR