

# 2002 UNIFORM BUSINESS REPORT (UBR)

0373362 AV

DOCUMENT # P94000043511

1. Entity Name  
ENGLE HOMES/COLORADO, INC.

Principal Place of Business

% ENGLE HOMES INC.  
123 N.W. 13TH ST.  
BOCA RATON FL 33432

Mailing Address

% ENGLE HOMES INC.  
123 N.W. 13TH ST.  
BOCA RATON FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0496809

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAPIRO, DAVID  
% ENGLE HOMES INC.  
123 N.W. 13TH ST., STE. 300  
BOCA RATON FL 33432

Name JOHN A. KRAYNICK

Street Address (P.O. Box Number is Not Acceptable)

123 NW 13TH ST. SUITE 300

City BOCA RATON

FL

Zip Code 33432

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  JOHN A. KRAYNICK, VICE PRESIDENT 2-11-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DV ☒ Delete  
NAME ENGLESTEIN, ALEC  
STREET ADDRESS % 123 N.W. 13 ST, STE. 300  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE DV ☐ Change ☒ Addition  
NAME MON, ANTONIO B.  
STREET ADDRESS 4000 HOLLYWOOD BLVD., SUITE 500-N  
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE P ☐ Delete  
NAME ECKBERG, ERIC  
STREET ADDRESS 7340 E. CALEY AVENUE, SUITE 300  
CITY-ST-ZIP ENGLEWOOD CO 80111

TITLE VST ☐ Change ☒ Addition  
NAME LEIKERT, PAUL  
STREET ADDRESS 123 N.W. 13TH ST., SUITE 300  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE DV ☐ Delete  
NAME KRAYNICK, JOHN A  
STREET ADDRESS % 123 N.W. 13 ST, STE. 300  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ Change ☐ Addition  
NAME 600005022356-3  
STREET ADDRESS -02/26/02--01091--013  
CITY-ST-ZIP \*\*\*158.75 \*\*\*158.75

TITLE VSTD ☒ Delete  
NAME SHAPIRO, DAVID  
STREET ADDRESS 123 NW 13TH STREET SUITE 300  
CITY-ST-ZIP BOCA RATON FL 33432

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

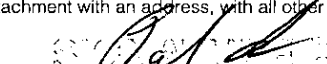
TITLE VAS ☐ Delete  
NAME HUBENAK, HOLLY A  
STREET ADDRESS 123 NW 13TH STREET SUITE 300  
CITY-ST-ZIP BOCA RATON FL 33432

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

TITLE DV ☐ Delete  
NAME DELIKANAKIS, YANNIS  
STREET ADDRESS 123 NW 13TH STREET SUITE 300  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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.

SIGNATURE:  Paul Leikert, V.P.P. 2-11-02 561-391-4012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

FILED

02 FEB 12 AM 9 17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE