

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000045350

1. Entity Name

PRESTIGE HOME BUILDERS, INC.

FILED
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90011 029 ***558.75

Principal Place of Business

7600 DOCTOR PHILLIPS BLVD.
 STE 2 BX 95
 ORLANDO FL 32819
 US

Mailing Address

7600 DOCTOR PHILLIPS BLVD.
 STE 2 BX 95
 ORLANDO FL 32819
 US

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

59-3249883

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

DETERT, ALLAN L
 7600 DR. PHILLIPS BLVD.
 SUITE 2
 ORLANDO FL 32819

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.

SIGNATURE

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 P ☐ Delete
 NAME DETERT, ALLAN L
 STREET ADDRESS 7600 DR PHILLIPS BLVD SUITE 2
 CITY-ST-ZIP ORLANDO FL

TITLE V.P. ☐ Change ☒ Addition
 NAME JANET KIRCHER
 STREET ADDRESS 7600 DR Phillips Blvd Suite 2
 CITY-ST-ZIP ORLANDO FL 32819

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V.P. ☐ Change ☒ Addition
 NAME JEFFREY DOWD
 STREET ADDRESS 7600 DR Phillips Blvd Suite 2
 CITY-ST-ZIP ORLANDO FL 32819

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V.P. ☐ Change ☒ Addition
 NAME GARY CLARK
 STREET ADDRESS 7600 DR Phillips Blvd Suite 2
 CITY-ST-ZIP ORLANDO FL 32819

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE REQUIRED ALLAN L. Detert Pres 7/10/00 407 876 3768

Date

Daytime Phone #