2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P94000089958 **DOCUMENT#**

1. Entity Name

SIGNATURE:

WRIGHT CUSTOM HOMES, INC.



FILED Feb 03, 2003 8:00 am **Secretary of State**

02-03-2003 90023 014 ***150.00

Principal Place o		· · · · · · · · · · · · · · · · · · ·	g Address			ļ				
1795 BOBTAIL D			BOBTAIL DRIVE			}				
MAITLAND FL 32	2751		AND FL 32751		•		L + B-0 + B B 4 B + B + B B B B B B B B			#11 # 2 \B\(\)
U\$		US				}				
2. Principal Plac	ce of Business	3. Mail	ing Address					ENIL en im aand i i		0 H 0 1 H 0 H 10 B 1
	lles Circle		926 Versailles Circle							
Suite, Apt. #,	etc.	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State Maitland,	FL		City & State Maitland, FL			4.	59-3283132	?	J	oplied For ot Applicable
Zip 32751	Country USA	Zip 32	Zip Countr 32751 US			5.	. Certificate of Status Desired		8.75 Add ee Require	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
			<u> </u>	<u>.</u>	Name	Kennet	h.L. Wright			
WRIGHT, KE							(P.O. Box Number is Not Acceptable) 6 Versailles Circle			
. 1795 BOBTA MAITLAND F					<u></u>	926 Ve	ersailles Circle			
***************************************	City			 Maitla		FL	Zip Cod	 §		
9 The shourt	mad oatily assemble this	ntatament for the many	nno of observing the	rogists	nd office at		agent, or both, in the State of Fl		J	
	amed entity submits this to as of registered agent.	statement for the purpo	use of changing its	registen	ed dilice of	registered a	agent, or both, in the state of Fi	Uliga. Talii la	urunar witir,	and accept
SIGNATURE	gnature, typed or printed name of r	egistered agent and title if appl	icable. (NOT	E: Registere	d Agent signatur	e required when	n reinstating)	DATE		 _
	E NOW!!! FEE IS \$1 lay 1, 2003 Fee will b						9. Election Campaign Fi	nancing	 \$5.0	0 May Be
	ayable to Florida Dep						Trust Fund Contribution	on. 나	Added	to Fees
10.	OFF	ICERS AND DIRECTOR	RS	11.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE P	TD		☐ Delete	TITLE		PID			Change	Addition
	vright, kenneth L			NAM	E]		nt, Kenneth L.			
	795 BOBTAIL DRIVE			STRE	ET ADDRESS	926 1	ersailles Circle			
CITY-ST-ZIP N	IAITLAND FL 32751			CITY	-ST-ZIP		and, FL 32751	-,		
	'SD		☐ Delete	TITLE	:	VSD	DIM, 111 32/31		Change	☐ Addition
	VRIGHT, JULIE S			NAM			rt, Julie S.		11	
	795 BOBTAIL DRIVE				ET ADDRESS		ersailles Circle			
	IAITLAND FL 32751			-₽	-ST-ZIP		ard, FL 32751	·		
TITLE			☐ Delete	TITLE	1	+ 444	222, 12 32.31		☐ Change	Addition
NAME				NAM	l l					
_STREET ADDRESS City-St-zip					ET ADDRESS -ST-ZIP			·		
				-		-			☐ Change	Addition
TITLE NAME			☐ Delete	TITLE					∟: Unange	☐ ¥00III0∏
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				4	-ST-ZIP					
TITLE			Delete	TITLE					☐ Change	Addition
NAME			in polote	NAM	í					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				CITY	-ST-ZIP					
TITLE			☐ Delete	TITLE		·			☐ Change	☐ Addition
NAME		,		NAM	:				-	
STREET ADDRESS				STRE	ET ADDRESS					
CITY-ST-7IP				ĈITV.	-ST_7IP					

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 drivustee 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.

012903

4079473677

Daytime Phone #

YSNATURE RECKINETI DWCight

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR