

2002 UNIFORM BUSINESS REPORT (UBR)

0874211 AV

DOCUMENT # P95000014462

1. Entity Name

ENGLE HOMES/SOUTHWEST FLORIDA, INC.

Principal Place of Business

123 N.W. 13TH ST.
SUITE 300
BOCA RATON FL 33432

Mailing Address

123 N.W. 13TH ST.
SUITE 300
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 65-0559002

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
123 N.W. 13TH STREET
SUITE 300
BOCA RATON FL 33432

Name JOHN A. KRAYNICK

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

123 N.W. 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 VD ☒ Delete
NAME ENGELSTEIN, 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 VSTD ☒ Delete
NAME SHAPIRO, DAVID
STREET ADDRESS 123 N.W. 13 ST., STE. 300
CITY-ST-ZIP BOCA RATON FL 33432

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

TITLE VD ☐ 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 100005022331
STREET ADDRESS -02/26/02-01091-002
CITY-ST-ZIP ***158.75 ***158.75

TITLE P ☐ Delete
NAME COBB, DAVID A
STREET ADDRESS 14009 CLEAR WATER LANE
CITY-ST-ZIP FT MYERS FL 33907

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

TITLE DV ☐ Delete
NAME MCADEN, TOMMY L
STREET ADDRESS 123 N.W. 13TH ST. #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 N.W. 13TH ST. #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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PAUL LEIKERT, VICE PRESIDENT 2-11-02 561-391-4012

Date

Daytime Phone #

CR2E034 (9/01)