

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000032887

1. Entity Name

BAY AREA HOMES, INC.

Principal Place of Business

Mailing Address

6318-113TH AVE. E.
TEMPLE TERRACE FL 33617
US

6318-113TH AVE. E.
TEMPLE TERRACE FL 33617
US

2. Principal Place of Business

3. Mailing Address

6318-113TH Ave.

6318-113TH Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

TEMPLE TERRACE, FL.

TEMPLE TERRACE, FL.

Zip

Country

Zip

Country

33617

HILLSBOROUGH

33617

HILLSBOROUGH

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPEZ, AL R JR.
4600 W. CYPRESS STREET
SUITE 500
TAMPA FL 33607

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 \$150.00
After MAY 1, 2001 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 PDST ☐ Delete
NAME WIENMAN, JAMES W.
STREET ADDRESS 424 BELLE VIEW AVE 6318-113TH Ave.
CITY-ST-ZIP TEMPLE TERRACE FL

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

TITLE V/P - SEC. TREASURER ☐ Delete
NAME JOHN P. WIENMAN
STREET ADDRESS 6318 113TH Ave.
CITY-ST-ZIP TEMPLE TERRACE, FL. 33617

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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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: JAMES W WIENMAN (PRES)

1-8-01 813-9884747

Date

Daytime Phone #

0349067

CR2E034 (10/00)



DO NOT WRITE IN THIS SPACE

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