

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 30, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000056261**

1. Entity Name  
**ADVANCED HOMES, INC.**

Principal Place of Business 3856 WILDER BLVD  FERNANDINA BCH 32034	FL	Mailing Address 3856 WILDER BLVD  FERNANDINA BCH 32034	FL
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number <b>59-3456997</b>	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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**

**WILDER KENNY**  
**3856 WILDER BLVD**  
  
**FERNANDINA BCH FL**  
**32034 US**

Name
Street Address (P.O. Box Number is Not Acceptable)
City <b>FL</b> 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 **KENNY WILDER**

**04/30/2001**

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	SH	<input type="checkbox"/> Delete
NAME	<b>WILDER ERNEST T</b>	
STREET ADDRESS	<b>3856 WILDER BLVD</b>	
CITY-ST-ZIP	<b>FERNANDINA BCH FL 32034</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>YONN TIMMY</b>	
STREET ADDRESS	<b>4208 SUMMER BREEZE DR</b>	
CITY-ST-ZIP	<b>FERNANDINA BCH FL 32034</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>WILDER KENNY</b>	
STREET ADDRESS	<b>3856 WILDER BLVD</b>	
CITY-ST-ZIP	<b>FERNANDINA BCH FL 32034</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: Kenny Wilder**

Pres **04/30/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

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**PERRY G. BENNETT, SECRETARY**  
**215 DENISE DRIVE**

**JACKSONVILLE, FLORIDA 32218**