

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90093 028 ***150.00

DOCUMENT # P97000070424

1. Entity Name

GOLDEN RULE CUSTOM HOMES, INC.



Principal Place of Business

**4102 OAK POINTE DRIVE
GULF BREEZE FL 32563
US**

Mailing Address

**POB OX 6248
GULF BREEZE FL 32563
US**

2. Principal Place of Business

1180 Mary Lou Ln

3. Mailing Address

Suite, Apt. #, etc.

City & State

Gulf Breeze, FL

City & State

Zip

32563

Country

USA

Zip

Country

4. FEI Number

59-3468285

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JOYNER, RANDAL R
4102 OAK POINTE DRIVE
GULF BREEZE FL 32563**

7. Name and Address of New Registered Agent

Name **Joyner, Randal R**

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

1180 Mary Lou Ln

City **Gulf Breeze, FL**

Zip Code

32563

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

R. Randal Joyner President

(NOTE: Registered Agent signature required when reinstating)

2-15-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPST**
NAME **JOYNER, RANDAL R**
STREET ADDRESS **4102 OAK POINTE DRIVE**
CITY-ST-ZIP **GULF BREEZE FL 32581**

☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1180 Mary Lou Lane**
CITY-ST-ZIP **Gulf Breeze, FL 32563**

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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 or trustee 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.

SIGNATURE:

R. Randal Joyner President

Date

Daytime Phone #

CR2E034 (10/02)