## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000079582

Entity Name: FLORIDA HOMES & INVESTMENT REALTY, INC.

FILED May 09, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1751 NORTHGATE BLVD SARASOTA, FL 34234 US				1065 BAYSHORE DR. ENGLEWOOD, FL 34223 US			
Current Mailing Address:				New Mailing Address:			
POB 18692 SARASOT	2 A, FL 34276	US		PO BOX 18 SARASOTA	3692 A, FL 34276	US	
FEI Number:	65-0779884	FEI Number Applied For ( )	FEI Num	nber Not Appli	icable ( )	Certific	ate of Status Desired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
EMANUELLI, TONY 2729 NANCY STREET SARASOTA, FL 34236				EMANUELLI, TONY 2729 NANCY ST. SARASOTA, FL 34236			
	named entity s e of Florida.	ubmits this statement for the pur	rpose of	f changing it	ts registered of	fice or	registered agent, or both,
SIGNATURE:				05/09/2002			
	Electroni	c Signature of Registered Agent	t				Date
Election Can		satisfy its Intangible Tax filing requir Trust Fund Contribution(). 'ORS:				TO OF	FICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () EMANUELLI, TO 2729 NANCY ST SARASOTA, FL	REET		Title: Name: Address: City-St-Zip:	()	Change	( ) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P/BK () BEST, WILLIAM 3110 ALTA VIST SARASOTA, FL	I TA ST.	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	N/A ( ) N/A, N/A N/A N/A, N/ N/A	Change	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	N/A ( ) N/A, N/A N/A N/A, N/ N/A	Change	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	N/A ( ) N/A, N/A N/A N/A, N/ N/A	Change	(X) Addition
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	N/A ( ) N/A, N/A N/A N/A, N/ N/A	Change	(X) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM BEST P/BK 05/09/2002