

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000051147

1. Entity Name
BUILDERS WORLD INTERNATIONAL, INC.

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90030 030 ***550.00

Principal Place of Business
4328 BLUE HERON DRIVE
PONTE VEDRA BEACH FL 32082

Mailing Address
4328 BLUE HERON DRIVE
PONTE VEDRA BEACH FL 32082



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
200 EXECUTIVE WAY

3. Mailing Address
200 EXECUTIVE WAY

Suite, Apt. #, etc.
STE 205

Suite, Apt. #, etc.
STE 205

City & State
PONTE VEDRA BEACH FL

City & State
PONTE VEDRA BEACH FL

Zip
32082

Country
ST. JOHNS

Zip
32082

Country
ST. JOHNS

4. FEI Number
59-3524663

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

MCGUFFIN, JAMES P JR.
4328 BLUE HERON DRIVE
PONTE VEDRA BEACH FL 32082

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 *James P. McGuffin Jr.*

(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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
MCGUFFIN, JAMES P JR.
4328 BLUE HERON DRIVE
PONTE VEDRA BEACH FL 32082

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

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MCGUFFIN, JAMES P JR.
4328 BLUE HERON DRIVE
PONTE VEDRA BEACH FL 32082

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☐ Change ☐ Addition

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 information empowered.

SIGNATURE: *James P. McGuffin Jr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)