

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000024593**

1. Entity Name

DIVOSTA HOMES SALES, INC.**FILED****Apr 16, 2001 8:00 am**
Secretary of State

04-16-2001 90273 036 ***150.00

00037364

DO NOT WRITE IN THIS SPACE

Principal Place of Business 4500 PGA BOULEVARD #400 PALM BEACH GARDENS FL 33418	Mailing Address 33 BLOOMFIELD HILLS PKWY 200 BLOOMFIELD HILLS MI 48304
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 65-0906018	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324

7. Name and Address of New Registered Agent 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 _____ (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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HATHAWAY, CHARLES H 4500 PGA BOULEVARD #400 PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS SHANNON, WILLIAM E. 4500 PGA BOULEVARD #400 PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TROTTE, GLEN T 4500 PGA BOULEVARD #400 PALM BEACH GARDENS FL 33418 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SMITH, HARMON D 4500 PGA BLVD 400 WEST PALM BEACH FL 33418 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ZUKOFF, COLETTE R 33 BLOOMFIELD HILLS PKWY 200 BLOOMFIELD HILLS MI 48304 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ROBINSON, BRUCE E 33 BLOOMFIELD HILLS BLOOMFIELD HILLS MI 48304 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 like empowered.

SIGNATURE: Colette R. Zukoff **Colette R. Zukoff** 4/4/01 **248-644-7300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment

DiVosta Homes Sales, Inc.

#P99080124593

D0037364

Primary Address: 33 Bloomfield Hills Pky., Ste. 200
Bloomfield Hills, MI 48304

Maureen E. Thomas Asst. Secretary

Primary Address: 33 Bloomfield Hills Pky., Ste. 200
Bloomfield Hills, MI 48304

Colette R. Zukoff Asst. Secretary

Primary Address: 33 Bloomfield Hills Pky., Ste. 200
Bloomfield Hills, MI 48304