2000 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name	MENT # P990000 DE HOMES, INC.	3266	3		Sir Property	May 18, Secreta		State
Principal Place	of Business	Malling .	Address	/;				
1 1			FTON DRIVE WEST	· · ·				
IACKSONVILLE F	EL 32224	JACKSON	VILLE FL 32224-3845	٠ ,٠٠٠	• •			1
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2. Principal Place of Business 3. Mailing Add								
				o Hillock Dr. E.		DO.NOT.WRITE.IN	THIS SPACE	!
				·		<u>59-356889</u>	<u> </u>	! !
City & State	Sonville FL	-Gly &	State KSONVI	lle Fl	_ 4,	501-35/28S		olied For ` Applicable
Zip	Country	Zip -		Country	en 5.	Certificate of Status Desired	\$8.75 Addi	tional
<u> </u>	6. Name and Address of Current	Registered	Acent	-	<u> </u>	Name and Address of New Regist	Fee Hequired	'
		(i	Name -	Jerry	- T 2-0		
WOLF, WAYNE A						Sox Number is Not Acceptable)		
3733 UNIVERSITY BOULEVARD W. SUITE 203			1	100	, 11.	Maar Daise		
JACKSONVILLE FL 32217				100 city	(O H	MOCK Drive		
- س			<u> </u>		lack	Sonville	FL Z	221
8. The above	named entity submits this statement lo	the purpos	sè of changing its re !	gistered office or	registered ag	gent, or both, in the State of Florida.	,	.
SIGNATURE		Ì	Jern	$1 \in \mathcal{D}$	ean,	President	2/8/6	00
	Signaldra, typed or printed name of registered agent	and title if soplic	able. (NOTE, F	egistered Agent signatu	re required when r	einstating)	DATE	1
Tax filling re	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	.	FILE NOW!!! After MAY 1, 2000 ke Check Payable		50.00	10. Election Campaign Financi Trust Fund Contribution.		O May Be to Fees
11.	OFFICERS AND			12.		L ODITIONS/CHANGES TO OFFICER	S AND DIRECTORS	3 IN 11
TITLE			Delete	TITLE			Change	Addition 66
NAME STREET AODRESS	Browne, William W Sr. 2560 Bluffton Drive West	}	! !	NAME STREET ADDRESS				noilibby CR2E034 (9/99)
CITY-ST-ZIP	JACKSONVILLE FL 32224			CITY-ST-ZIP				
INTLE	DEAN JEDOVE	}	Delete	ากเร	Presid		Change	Addition 5
NAME STREET ADDRESS	DEAN, JERRY E 2 560 BLUFFTON DRIVE WES T	Ċ	hange >	NAME STREET ADDRESS		Jerry E.		
CITY-ST-ZIP	J acksonville FL 32224		9	CITY-ST-ZIP	Jack	Hillock Dr. E. Sonville, Fr 32	271	i
TITLE		1	☐ Delete	TITLE			Change	☐ Addition
name Street address				NAME STREET ADDRESS		المنافعينينية الما		<u> </u>
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ŢITLE			Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS				NAME STREET ADDRESS				ļ Ì.
CITY-ST-ZIP				CITY-ST-ZIP				1
indicated	certify that the information supplied wild on this report or supplemental report or poration or the receiver or trustee empl. or on an attachment with an address	is true and a	accurate and that m	v sinnature shall t	have the same	e ledal effect as it made under dath	i: that I am an officer	or director 1
changed	or on an attachment with an address	with all oth	er like empowered.	7772	~	0.5	(904)	781-1
SIGNAT	URE:	PRINTED NAM	E OF SIGNING OFFICER O	PARTY DIRECTOR	<u>F. J.</u>	$\frac{1800}{2}$	Davtime Phone #	0897