

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90271 009 ***150.00

DOCUMENT # P99000071919

1. Entity Name

MARK TIMOTHY CUSTOM HOMES, INC.

Principal Place of Business Mailing Address
 1177 GEORGE BUSH BLVD 1177 GEORGE BUSH BLVD
 SUITE 101 SUITE 101
 DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

2. Principal Place of Business 3. Mailing Address
 33 SE FIFTH STREET 33 SE FIFTH STREET

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 BOCA RATON, FL BOCA RATON, FL

Zip Country Zip Country
 33432 USA 33432 USA

4. FEI Number Applied For
 65-0941211 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

PULTE, MARK T
 1177 GEORGE BUSH BLVD
 SUITE 101
 DELRAY BEACH, FL 33483

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

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

(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 \$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. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
 NAME PULTE, MARK T
 STREET ADDRESS 1177 GEORGE BUSH BLVD, #101
 CITY - ST - ZIP DELRAY BEACH, FL 33483 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

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 CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

A0049493

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)