

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S05158

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: BERMUDA BUILDERS, INC.

Current Principal Place of Business:

600 N THACKER AVE
SUITE A-14
KISSIMMEE, FL 34741 US

New Principal Place of Business:

922 BRACK STREET
KISSIMMEE, FL 34744 US

Current Mailing Address:

P.O. BOX 422889
KISSIMMEE, FL 347422889 US

New Mailing Address:

922 BRACK STREET
KISSIMMEE, FL 34744 US

FEI Number: 59-3028773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, WILEY E.
1809 W VIRGINIA AVE
KISSIMMEE, FL 34744

Name and Address of New Registered Agent:

WILEY JONES E.
1809 W VIRGINIA AVE
KISSIMMEE, FL 34744

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: WILEY E. JONES

04/23/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, WILEY E.
Address: 1809 W VIRGINIA AVE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILEY E. JONES

D

04/23/2002

Electronic Signature of Signing Officer or Director

Date