

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S57101

1. Entity Name

PADGETT HOMES, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90024 043 ***550.00

Principal Place of Business

5436 OAK CREST BLVD
SARASOTA FL 34233
US

Mailing Address

5436 OAK CREST BLVD
SARASOTA FL 34233
US

2. Principal Place of Business

4975 Cedar Oak Way

Suite, Apt. #, etc.

3. Mailing Address

4975 Cedar Oak Way

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Sarasota FL

Zip
34233

Country
US

City & State
Sarasota, FL

Zip
34233

Country
US

4. FEI Number

65-0265493

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PADGETT, DONALD H.
4883 GREYMOSS LANE
SARASOTA FL 34233

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
PADGETT, DONALD H.
4883 GREYMOSS LN.
SARASOTA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
PADGETT, JAMES C.
701 TYLER DR.
SARASOTA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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

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

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

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

TITLE
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:

DONALD H. PADGETT

PRESIDENT

7-1-2000 (941) 927-2596
Date Daytime Phone #

CR2E034 (5/00)