

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V69381

1. Entity Name

GODFREY CUSTOM HOMES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90169 035 ***150.00

Principal Place of Business

1216 N MT HOMRT JPMER RD
EUSTIS FL 32726
US

Mailing Address

1250 MT. HOMER RD.
SUITE 1
EUSTIS FL 32726-6268
US

2. Principal Place of Business

8529 US Highway 441
Suite, Apt. #, etc.

3. Mailing Address

8529 US Highway 441
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Leesburg, FL

City & State

Leesburg, FL

4. FEI Number

59-3147788

Applied For

Not Applicable

Zip

34788

Country

US

Zip

34788

Country

US

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

PULLUM, J. STEPHEN
1330 WEST CITIZENS BLVD.
SUITE 701
LEESBURG FL -4997

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
NAME GODFREY, JOSEPH P. JR.
STREET ADDRESS 1250 MT. HOMER RD. SUITE 1
CITY-ST-ZIP EUSTIS FL

TITLE DP ☒ Change ☐ Addition
NAME Godfrey, Joseph P. JR.
STREET ADDRESS 8529 US Highway 441
CITY-ST-ZIP Leesburg, FL 34788

TITLE DVS ☐ Delete
NAME GODFREY, JOSEPH P. III
STREET ADDRESS 1250 MT. HOMER RD. SUITE 1
CITY-ST-ZIP EUSTIS FL

TITLE DVS ☒ Change ☐ Addition
NAME Godfrey, Joseph P. III
STREET ADDRESS 8529 US Highway 441
CITY-ST-ZIP Leesburg, FL 34788

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

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 #

CR2E034 (9/99)