

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000085615 1. Entity Name LOGUE HOME INSPECTIONS INC	
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Principal Place of Business 4701 BERWYN COURT PALM HARBOR, FL 34685	Mailing Address 4701 BERWYN COURT PALM HARBOR, FL 34685
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DO NOT WRITE IN THIS SPACE

06212006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0152130	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MORRIS, JUDY A
10319 ASHCROFT TER
HOMOSASSA, FL 34446

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
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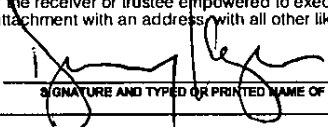
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS LOGUE, DANIEL M 4701 BERWYN COURT PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LOGUE, PATRICIA A 4701 BERWYN COURT PALM HARBOR, FL 34685
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07/19/06-80007-011 550.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **DANIEL LOGUE President** 6/20/06 321-365-8202

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #