

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000027612

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** HOME CHECK PLUS OF FLORIDA, INC.

**Current Principal Place of Business:**

1501 SW SAN ANTONIO DR  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

1501 SW SAN ANTONIO DR  
PALM CITY, FL 34990

**New Mailing Address:**

**FEI Number:** 26-4598409

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOVAK, PATRICIA  
1501 SW SAN ANTONIO DR  
PALM CITY, FL 34990 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DVP  
**Name:** NOVAK, KENNETH E  
**Address:** 1501 SW SAN ANTONIO DR  
**City-St-Zip:** PALM CITY, FL 34990

**Title:** DP  
**Name:** NOVAK, PATRICIA  
**Address:** 1501 SW SAN ANTONIO DR  
**City-St-Zip:** PALM CITY, FL 34990

I hereby 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 all other like empowered.

**SIGNATURE:** KENNETH E NOVAK

VP

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date