2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000017556

242 NE 4TH ST

OCALA, FL 34470

Address:

City-St-Zip:

FILED Apr 02, 2004 Secretary of State

Entity Name: BUILDING INSPECTION SERVICES OF OCALA, INC. **Current Principal Place of Business: New Principal Place of Business:** 1531 NE 2ST OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** 1531 NE 2 ST OCALA, FL 34470 FEI Number: 59-3175922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GAMACHE, JOYCE GAMACHE, JOYCE 948 NE 4 ST 1010 SW 29 STREET OCALA, FL 34470 US OCALA, FL 34474 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: JOYCE GAMACHE 04/02/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GAMACHE, JOYCE F Name: Name: 1531 NE 2ND ST Address: Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition GAMACHE, FRANCIS W Name: Name: GAMACHE, FRANCIS W 948 NE 4ST 1010 SW 29 STREET Address: Address: OCALA, FL 34470 OCALA, FL 34474 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition GAMAINE, JOHN Name: GAMACHE, JOHN Name:

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.

Address:

City-St-Zip:

1531 NE 2 ST

OCALA, FL 34470

SIGNATURE: JOYCE GAMACHE PT 04/02/2004