## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

### Apr 17, 2007 8:00 am Secretary of State **DOCUMENT # P05000083080** 04-17-2007 90044 028 \*\*\*150.00 1. Entity Name NO HASSLE HOME INSPECTIONS, INC. 4000-Principal Place of Business Mailing Address P.O. BOX 101031 P.O. BOX 101031 PALM BAY, FL 32910 PALM BAY, FL 32910 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02142007 Cha-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-2972870 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GREENAWAY, ROXANN ESQ. Street Address (P.O. Box Number is Not Acceptable) 1707 CANOVA STREET SE SUITE 1 PALM BAY, FL 32909 Zip Code FL 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 4.12.07 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. MUE Delete HILLE Change Addition FLAVIUS, CLIFTON D NAME NAME STREET ADDRESS P.O. BOX 101031 STREET ADDRESS CITY-ST-ZIP PALM BAY, FL 32910 CITY-ST-ZIP TITLE VP ☐ Delete HH ☐ Change ☐ Addition FLAVIUS, CLIFTON D NAME STREET ADDRESS P.O. BOX 101031 STREET ADDRESS CITY-ST-ZIP PALM BAY, FL 32910 CITY - ST - ZIP ☐ Delete TITLE Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITI F ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information upperfemental 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 eliver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if not with an address, with all other like empowered 12. I hereby certify that the info indicated on this report or & of the corporation or the SIGNATURE NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

1. Entity Name P.O. BOX 101031 PALM BAY, FL 32910 DO NOT WRITE IN THIS SPACE SUITE 1 20001173516

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#P05000083080

NO HASSLE HOME INSPECTIONS, INC.

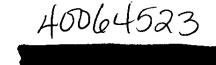


**ATTACHMENT** 

Principal Place of Business

Mailing Address

P.O. BOX 101031 PALM BAY, FL 32910



02142007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-2972870

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENAWAY, ROXANN ESQ. 1707 CANOVA STREET SE PALM BAY, FL 32909

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	urpose of changing its registered	office or re	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name or registered agent and title of	applicable (NOTE Registered /	lgent signature	required when reinstating)	DA"E
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.  \$5,00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLAVIUS, CLIFTON D P.O. BOX 101031 PALM BAY, FL 32910	·			
IHLE NAME STREET ADDRESS CITY-ST-ZIP	VP FLAVIUS, CLIFTON D P.O. BOX 101031 PALM BAY, FL 32910				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME SIREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the promation supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report or supplier people 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 of the receiver or pusted 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 attacoment wirryan accress, with all other like empowered.

SIGNATURE:

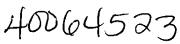
TITLE

STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

321-537

# ATTACHMENT





# **Division of Corporations**

## 2007 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.

Document Number

P05000083080

Business Entity Name—NO HASSLE HOME INSPECTIONS, INC.

Original File Date

06/09/2005

FEI Number

20-2972870

Principal Address P.O. BOX 101031

PALM BAY, FL 32910

Mailing Address

P.O. BOX 101031

PALM BAY, FL 32910

Registered Agent ESQ, ROXANN GREENAWAY

1707 CANOVA STREET SE

SUITE 1

PALM BAY, FL 32909 US

### Officer/Director Name And Address

CLIFTON D FLAVIUS P.O. BOX 101031 PALM BAY, FL 32910

VP

**CLIFTON D FLAVIUS** P.O. BOX 101031

PALM BAY, FL 32910

If all of the above information is correct and you do not wish to make any changes, please select:



If you need to make changes to the above information, please select:

Make Changes