

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000000023

**Entity Name:** HOME INSPECTORS ASSOCIATION OF S. FLORIDA, INC.

**Current Principal Place of Business:**

5891 NW 65 TERRACE  
PARKLAND, FL 33067

**Current Mailing Address:**

5891 NW 65 TERRACE  
PARKLAND, FL 33067 US

**FEI Number:** 46-1654897

**Certificate of Status Desired:** Yes

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

ROMANO, PETER SR.  
5891 NW 65 TERRACE  
PARKLAND, FL 33067 US

*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

**Officer/Director Detail :**

Title           DIRECTOR  
Name           CABAL, RAFAEL  
Address        11615 SW 138 AVE  
City-State-Zip: MIAMI FL 33186

Title           TREASURER  
Name           WHILIOTE, TONY  
Address        710 SE 6TH. STREET  
City-State-Zip: POMPANO BEACH FL 33060

Title           DIRECTOR  
Name           ROMANO, PETER SR.  
Address        5891 NW 65 TERRACE  
City-State-Zip: PARKLAND FL 33067

Title           PRESIDENT  
Name           HAGGERTY, BRENDAN  
Address        10900 NW 20 COURT  
City-State-Zip: SUNRISE FL 33322

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PETER ROMANO

**DIRECTOR**

**01/13/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date