I hereby certify that the information indicated on this report or supplemental report is true ar oath; that I am an officer or director of the corporation or the receiver or trustee empowered		
above, or on an attachment with all other like empowered.		
SIGNATURE: JAMES T CALLERI	PRESIDENT	01/08/2020

SIGNATURE: JAMES T CALLERI

# Name and Address of Current Registered Agent:

CALLERI, JAMES T 5251 SUMMIT VIEW DRIVE BROOKSVILLE, FL 34601 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: JAMES T CALLERI

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	PSTD
Name	CALLERI, JAMES T
Address	5251 SUMMIT VIEW DRIVE
City-State-Zip:	BROOKSVILLE FL 34601

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P02000126420

#### Entity Name: AFFIRMATIVE HOME INSPECTION SERVICES INCORPORATED

# **Current Principal Place of Business:**

5251 SUMMIT VIEW DRIVE BROOKSVILLE, FL 34601

# **Current Mailing Address:**

5251 SUMMIT VIEW DRIVE BROOKSVILLE, FL 34601 US

# FEI Number: 02-0678250

# Certificate of Status Desired: No

01/08/2020

Date

Date

FILED Jan 08, 2020 Secretary of State 4334131448CC

Electronic Signature of Signing Officer/Director Detail