

FILE NOW: FILING FEE AFTER MAY 1ST \$ \$550.00

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90116 006 \*\*\*150.00

0484889

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
--	---	--

**DOCUMENT # 375849**

1. Corporation Name  
**HOUSE WATCHERS, INC.**

Principal Place of Business  
**POST OFFICE BOX 10301**  
**BRADENTON FL 34282**

Mailing Address  
**POST OFFICE BOX 10301**  
**BRADENTON FL 34282**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

**01/20/1971**

4. FEI Number

**59-1316065**

Applied For  
No: Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**GREENHILL, DONALD L.**  
**4406 102 ST. W.**  
**BRADENTON FL 34210**

10. Name and Address of New Registered Agent

81 Name **Greenhill, Ida M.**  
82 Street Address (P.O. Box Number Is Not Acceptable)  
**Same**  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Ida M. Greenhill*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**4-23-99**

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE  
NAME **BOLEN, DONNA M.**  
STREET ADDRESS **1210 SANTIAGO DR.**  
CITY-ST-ZIP **BRADENTON, FL 00000**

TITLE **D** ☒ DELETE  
NAME **GREENHILL, DONALD L.**  
STREET ADDRESS **4406 102 ST. W.**  
CITY-ST-ZIP **BRADENTON, FL 34210**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP **34209**

2.1 TITLE **D** ☒ Change ☐ Addition  
2.2 NAME **Greenhill, Ida M.**  
2.3 STREET ADDRESS **4406 102 St. West**  
2.4 CITY-ST-ZIP **Bradenton, FL 34210**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Ida M. Greenhill*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4-23-99 (941) 774-1238**

CR2E034 (11/98)