

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000001501

1. Entity Name

ENVIRONMENTAL HOME PROTECTION, INC.



Principal Place of Business

1202 ASHLEY STREET
VALDOSTA, GA 31601

Mailing Address

1202 ASHLEY STREET
VALDOSTA, GA 31601

08082006 No Chg-P CR2E034 (11/05)

4. FEI Number
31-1590021Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JOHNSON, ERIC
2901 PALM BAY RD
SUITE E
PALM BAY, FL 32905DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

U000000574362
08/14/06 00011 014 150.00FILE NOW!!! FEE IS \$150.00
Due by September 6, 20069. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesIn accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	HENSLEY, RON
STREET ADDRESS	2408 WINDING WAY
CITY- ST- ZIP	VALDOSTA, GA 31602

TITLE	VS
NAME	HENSLEY, FLORENDA
STREET ADDRESS	2408 WINDING WAY
CITY- ST- ZIP	VALDOSTA, GA 31602

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 August 2006 229244-2100
Date Daytime Phone #