

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H55206

FILED
Feb 16, 2010
Secretary of State

Entity Name: HOMEBUYERS INSPECTION SERVICE OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

13650 FIDDLESTICKS BLVD
SUITE 202-399
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

13650 FIDDLESTICKS BLVD
SUITE 202-399
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 59-2357422 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENSEL, RUSSELL J
13650 FIDDLESTICKS BLVD
SUITE 202-399
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST
Name: HENSEL, RUSSELL J
Address: 13650 FIDDLESTICKS BLVD, SUITE 202-399
City-St-Zip: FORT MYERS, FL 33912 US

Title: P
Name: HENSEL, RUSSELL J P
Address: 13650 FIDDLESTICKS BLVD, SUITE 202-399
City-St-Zip: FORT MYERS, FL 33912 US

Title: VP
Name: KING, SHERI L VP
Address: 13650 FIDDLESTICKS BLVD, SUITE 202-399
City-St-Zip: FORT MYERS, FL 33912 US

Title: SECY
Name: STINES, SHELLY K SECY
Address: 13650 FIDDLESTICKS BLVD, SUITE 202-399
City-St-Zip: FORT MYERS, FL 33912 US

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

SIGNATURE: RUSSELL J HENSEL

PST

02/16/2010

Electronic Signature of Signing Officer or Director

Date