

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L87841** (7)

1. Corporation Name

W.R. INSPECTION SERVICES, INC.



Principal Place of Business

**722 BRASSIE LANE
KISSIMMEE FL 34759-4105
US**

Mailing Address

**722 BRASSIE LANE
KISSIMMEE FL 34759-4105
US**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/13/1990

3a. Date of Last Report

04/27/1995

4. FLE Number

59-3018347

Applied For

Not Applicable

5. Certificate or Statute Declared

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**KNAPP, STEPHEN M.
5417 SOUTH FLORIDA AVE.
LAKELAND FL 33807-6422**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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, thereby accepting the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Please print the name of the person signing this statement)

Signature (Please print the name of the person signing this statement)

Date

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
KNAPP, STEPHEN M.
5417 S. FLORIDA AVE.
LAKELAND FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PDC
ROLL SR., WILLIAM E.
622 BRASSIE LANE
KISSIMMEE FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VD
ROLL, REBA K.
722 BRASSIE LANE
KISSIMMEE FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**TSD
ROLL, THERESA A.
722 BRASSIE LANE
KISSIMMEE FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
ROLL JR., WILLIAM E.
722 BRASSIE LANE
KISSIMMEE FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 687, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William E. Roll
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-427-0882

CR2E034 (12/95)