## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 30, 2004 8:00 am Secretary of State DOCUMENT # L87841 1. Entity Name 04-30-2004 90272 026 \*\*\*150.00 W.R. INSPECTION SERVICES, INC. Principal Place of Business Mailing Address 462 PEPPERMILL CIRCLE KISSIMMEE FL 34758-3672 462 PEPPERMILL CIRCLE KISSIMMEE FL 34758-3672 9407662**5** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 59-3018347 Not Applicable Žip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KNAPP, STEPHEN M. Street Address (P.O. Box Number is Not Acceptable) 5417 SOUTH FLORIDA AVE. LAKELAND FL 33807-6422 City Zip Code 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition NAME KNAPP, STEPHEN M. NAME 5417 S. FLORIDA AVE. STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIP CITY-ST-ZIP TITLE PDC ☐ Delete TITLE Change ☐ Addition NAME ROLL SR., WILLIAM E. NAME **462 PEPPERMILL CIRCLE** STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34758 CITY-ST-ZIP CITY-ST-ZIP TITLE ۷D ☐ Delete TITLE ☐ Change ☐ Addition NAME ROLL, REBA K. NAME STREET ADDRESS 462 PEPPERMILL.CIR --STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34758 CITY-ST-ZIE TSD TITLE ☐ Delete Change ☐ Addition ROLL, THERESA A. NAME NAME 462 PEPPERMILL CIR STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34758 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. 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 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 empower

SIGNATURE: