
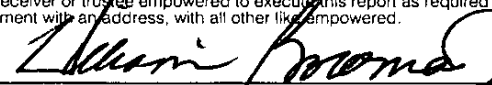


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2007 8:00 am
Secretary of State

05-31-2007 90002 049 ***150.00

DOCUMENT # P00000030073 1. Entity Name GENERAL HOME SERVICES, INC.					
Principal Place of Business 6705 WOOD MEADOW BRADENTON, FL 34202			Mailing Address 6705 WOOD MEADOW BRADENTON, FL 34202		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-1009765	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOWMAN, WILLIAM III 6705 WOOD MEADOW LP BRADENTON, FL 34202			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BOWMAN, WILLIAM III 6705 WOOD MEADOW LP BRADENTON, FL 34202		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 empowered.					
SIGNATURE: 			5-21-07 800-394-9790		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

ATTACHMENT

40119152

General Home Services, Inc.

6705 Woodmeadow Loop

Bradenton, Florida 34202

April 26, 2007

Ms. Holly Benson
DBPR Customer Corporation Center
1940 North Monroe Street
Tallahassee, Florida 32399 1027

Re: P00000030073

Dear Ms. Benson,

Please accept my renewal Annual Report and my check in the amount of \$150.00.

I have not received any renewal or other documents at my address. My accountant contacted me regarding my renewal. I am out of state, caring for my ill father.

If you have any questions please feel free to call me at 1 800 394-9790, or write to me at #500 Cochise Trail, Chatsworth, Georgia, 30705.

Thank you,



William Bowman, III
General Home Services, Inc.

RECEIVED

MAY 01 '07

DSO

Profit and NonProfit Annual Report Help

#P00000030073

Corporations can file an annual report on-line up through the administrative dissolution/revocation date. An amended annual report can be filed on-line at any time once the initial annual report has been filed.

Annual Reports are processed and posted within 24 to 48 hours of filing. A Certificate of Status can be requested. All correspondence is mailed via the US Postal Service to the corporate mailing address. We do not provide an e-mail acknowledgement.

Filing fees: The fee to file is based on the corporate status, for profit or not for profit.

For Profit fees: The fee to file a for profit annual report is \$150.00 if filed between January 1 and May. After May 1 a for profit corporation can be subject to a \$400.00 late fee.

Not for Profit fees: The fee to file a not for profit annual report is \$61.25. Not for profit corporations are not subject to any late fee after May 1.

Waiver of the \$400.00 late fee: The late fee of \$400.00 can be waived if the box indicating non-receipt of the prior notice is checked. Only the annual report fee will be charged.

Certificate of Status: A certificate of status is \$8.75.

What is a Certificate of Status? A certificate of status is a certificate certifying the corporation is registered and active with the Division of Corporations and has paid all fees due this office through December 31. The certificate is optional. Only one can be requested as part of the online annual report. You may request a certificate at a later date, and can be requested online.

Corporate Name: The name of a corporation can not be changed on the annual report. Articles of Amendment must be filed to change the corporate name.

FEI Number: This is the Federal Employer Identification number. This is a 9 digit number assigned by the Internal Revenue Service (IRS) by filing the SS-4 form. You may contact the IRS at 1-800-829-1040. In order for the annual report to be accepted, the corporation must provide the number, check the "APPLIED FOR" box, or the "NOT APPLICABLE" box.

If our records indicate the number was previously "APPLIED FOR", a number must now be provided, or the "NOT APPLICABLE" box checked. We can not file an annual report online where the number is being "APPLIED FOR" again. The annual report would need to be downloaded and mailed to our office. A copy of the SS-4 would need to be attached to the application.

When entering the FEI number, enter only numbers, do not enter the dash.

Principal place of business and mailing address: These addresses can be the same. They do not have to be in Florida. A Post Office Box is acceptable for the mailing address however the principal address must be a street address.



Division of Corporations

Annual Report

Annual Report Help

Document Number

P00000030073

Business Entity Name

GENERAL HOME SERVICES, INC.

FEI Number

651009765

FEI Number Status

☒ Listed Above ☐ Applied For ☐ Not Applicable

Certificate of Status Desired

☐ Yes ☒ No \$8.75 each

Election Campaign Financing Trust Fund Contribution

☐ Yes ☒ No

Principal Place of Business

Address 6705 WOOD MEADOW

Suite, Apt. #, etc.

City, State BRADENTON, FL

Zip Code & Country 34202

Mailing Address

Address 6705 WOOD MEADOW

Suite, Apt. #, etc.

City, State BRADENTON, FL

Zip Code & Country 34202

Name and Address of Registered Agent

Name (Last, First, Middle, Title) BOWMAN, WILLIAM, III

- OR -

Business to serve as RA

Address (PO Box is not acceptable) 6705 WOOD MEADOW LP

Suite, Apt. #, etc.

City, State BRADENTON, FL

Zip Code & Country 34202 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

ATTACHMENT
40119152

#P00000030073

entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title D
Name (Last, First, Middle, Title) BOWMAN, WILLIAM, III

- OR -

Entity Name to serve as
Officer/Director

Street Address 6705 WOOD MEADOW LP
City, State BRADENTON, FL
Zip Code & Country 34202

Title
Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title

Name (Last, First, Middle, Title),

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Archer
Archer

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue

Reset