

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057820

FILED
Apr 12, 2005
Secretary of State

Entity Name: BAY AREA HOME INSPECTION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

953 WINDING OAKS DR.
PALM HARBOR, FL 34683

New Principal Place of Business:

3343 E LAKE SHORE LN
CLEARWATER, FL 33761

Current Mailing Address:

953 WINDING OAKS DR.
PALM HARBOR, FL 34683

New Mailing Address:

3343 E LAKE SHORE LN
CLEARWATER, FL 33761

FEI Number: 59-3656207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANGUM, GREGORY P
953 WINDING OAKS DR.
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

MANGUM, GREGORY P
3343 E LAKE SHORE LN
CLEARWATER, FL 33761 US

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:

04/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MANGUM, GREGORY P
Address: 953 WINDING OAKS DR.
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANGUM, GREGORY P
Address: 3343 E LAKE SHORE LN
City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GREGORY P. MANGUM

PRES

04/12/2005

Electronic Signature of Signing Officer or Director

Date