

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112842

FILED  
Mar 05, 2009  
Secretary of State

Entity Name: CORNELL'S HOME SERVICE, INC.

## Current Principal Place of Business:

6568 MILLSTONE DRIVE  
NEW PORT RICHEY, FL 34655

## New Principal Place of Business:

## Current Mailing Address:

6568 MILLSTONE DRIVE  
NEW PORT RICHEY, FL 34655

## New Mailing Address:

FEI Number: 59-3685394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMES ACCT & TAX SERVICE INC.  
2942 49TH STREET  
ST. PETERSBURG, FL 33710 US

## Name and Address of New Registered Agent:

JAMES ACCT & TAX SERVICE INC.  
6568 MILLSTONE DRIVE  
NEW PORT RICHEY, FL 34655 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: GREGORY ROBERT CORNELL

03/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CORNELL, GREGORY R  
Address: 6568 MILLSTONE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP ( ) Delete  
Name: CORNELL, TINA  
Address: 6568 MILLSTONE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S ( ) Delete  
Name: CORNELL, ERIC ROBERT  
Address: 6568 MILLSTONE DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TINA CORNELL

VP

03/05/2009

Electronic Signature of Signing Officer or Director

Date