

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2003 8:00 am
Secretary of State

07-24-2003 90112 011 ***150.00

0151480 FP

DOCUMENT # P01000006593

1. Entity Name

TOTAL HOUSING CONTROL, INC.



Principal Place of Business

**11605 LAKE PARK ROAD
TAVARES FL 32778**

Mailing Address

**11605 LAKE PARK ROAD
TAVARES FL 32778**

2. Principal Place of Business

11541 Lane Park Rd.

3. Mailing Address

P.O. Box 296

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAVARES FL

City & State

TAVARES FL

Zip
32778

Country

U.S.

Zip
32778

Country

U.S.

4. FEI Number

59-3694087

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BOYETTE, WADE
1380 GRAND HWY STE 200
CLERMONT FL 34711**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 HOLDER, JUSTIN 15158 WEST COLONIAL DRIVE #204 WINTER GARDEN FL 34787	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLDER, CASEY 15158 WEST COLONIAL DRIVE #204 WINTER GARDEN FL 34787	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Holder, Justin P.O. Box 296 TAVARES, FL 32778	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASEY Holder P.O. Box 296 TAVARES, FL 32778	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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 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 empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-21-03

352-267-7876

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #



90146180
PO1000006593

To Whom It May Concern:

Because of our change of address we did not receive a prior notice for this filing. In asking the new residents of our prior address, they did not keep or forward any mail until I spoke with them a few weeks ago. I would assume that is why we did not get the first attempt. I hope you accept our apology for the delay. I have included our new mailing information and this will not be a problem again in the future.

Thank you for your understanding,

A handwritten signature in black ink, appearing to read 'Justin Holder', is written over a horizontal line.

Justin Holder
President
Total Housing Controls, Inc.