

# **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000025155

**FILED**  
**Jan 22, 2004**  
**Secretary of State**

**Entity Name:** NATIONAL PROPERTY INSPECTIONS, INC.

**Current Principal Place of Business:**

8256 WINDY PINE LANE  
JACCKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

8256 WINDY PINE LANE  
JACCKSONVILLE, FL 32244

**New Mailing Address:**

8256 WINDY PINE LANE  
JACKSONVILLE, FL 32244

**FEI Number:** 59-3704699

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

HEIDI, AMES S NONE  
8560 COLONY PINE CIRCLE WEST  
JACKSONVILLE, FL 32244 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: HEIDI S. AMES

01/22/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: BEUKEMA, CARTER J  
Address: 8256 WINDY PINE LANE  
City-St-Zip: JACCKSONVILLE, FL 32244

Title: SVD ( ) Delete  
Name: PETERSON, HEIDI S  
Address: 8256 WINDY PINE LANE  
City-St-Zip: JACCKSONVILLE, FL 32244

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: CARTER J BEUKEMA

PTD

01/22/2004

Electronic Signature of Signing Officer or Director

Date