

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000119551

Entity Name: AWARD HOME SERVICES, INC.

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

1536 SUNRISE PLAZA DRIVE  
SUITE 101  
CLERMONT, FL 34714

**New Principal Place of Business:**

1536 SUNRISE PLAZA DRIVE  
SUITE 101  
CLERMONT, FL 34714

**Current Mailing Address:**

1536 SUNRISE PLAZA DRIVE  
SUITE 101  
CLERMONT, FL 34714

**New Mailing Address:**

FEI Number: 20-1785803      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOLLAND, TINA M  
2303 HAMLIN TR.  
CLERMONT, FL 34714 US

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

WHEELER, TINA M  
2303 HAMLIN TR.  
CLERMONT, FL 34714 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: TINA M WHEELER

03/24/2009

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HOLLAND, TINA M  
Address: 2303 HAMLIN TRAIL  
City-St-Zip: CLERMONT, FL 34714

Title: STD ( ) Delete  
Name: NEELEY, REBEKAH  
Address: 16134 EGRET HILL STREET  
City-St-Zip: CLERMONT, FL 34714

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

Title: PD (X) Change ( ) Addition  
Name: WHEELER, TINA M  
Address: 2303 HAMLIN TRAIL  
City-St-Zip: CLERMONT, FL 34714

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 M WHEELER

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date