

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000003090	
1. Entity Name RICHARD CORNELL'S INSPECTION SERVICE, INC.	

Principal Place of Business 153 PALM CIRCLE ATLANTIS, FL 33462	Mailing Address PO BOX 6235 LAKE WORTH, FL 33466
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DO NOT WRITE IN THIS SPACE



04102005 No Chg-P CR2E034 (10/03)

4. FEI Number 13-4231740	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MEISEL, KEITH W 712 US HIGHWAY ONE SUITE 230 NORTH PALM BEACH, FL 33408
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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000314189 04/18/05-80157-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORNELL, RICHARD 153 PALM CIRCLE ATLANTIS, FL 33462
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORNELL, RICHARD 153 PALM CIR ATLANTIS, FL 33462
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD KEMPER CORNELL, BARBARA T 153 PALM CIR ATLANTIS, FL 33462
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Barbara Kemper Cornell - V. President</i>	4/15/05	261-737-3173
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		