

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90244 041 \*\*\*150.00

**DOCUMENT # P03000065570**

1. Entity Name  
**EARLY DETECTION HOME INSPECTION, INC.**



Principal Place of Business  
106 NAUGATUCK DRIVE  
JACKSONVILLE, FL 32225 US

Mailing Address  
106 NAUGATUCK DRIVE  
JACKSONVILLE, FL 32225 US

**54030410**



2. Principal Place of Business  
**106 Naugatuck Dr.**  
Suite, Apt. #, etc.

3. Mailing Address  
**Same**  
Suite, Apt. #, etc.

04082004 Chg-P CR2E034 (10/03)

City & State  
**Jacksonville, FL 32225**

City & State  
**Same**

Zip  
**32225**

Country  
**USA**

Zip  
**Same**

Country  
**Same**

4. FEI Number  
**03-0525577**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBINSON-HUSK, JANICE M  
106 NAUGATUCK DRIVE  
JACKSONVILLE, FL 32225

Name  
**N/A**

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 **N/A**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PD  
HUSK, JEFFREY P  
106 NAUGATUCK DRIVE  
JACKSONVILLE, FL 32225

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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☐ Change ☐ 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: **Jeffrey P. Husk**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-8-04** **904-220-7652**  
Date Daytime Phone #