



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

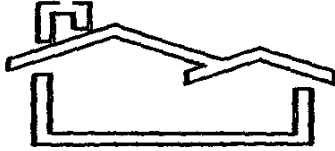
05-03-2004 90763 006 ***150.00

DOCUMENT # P03000074940 1. Entity Name PANHANDLE HOME SERVICES, INC.					
Principal Place of Business 209 N. MADISON DR. PENSACOLA, FL 32505			Mailing Address 209 N. MADISON DR. PENSACOLA, FL 32505		
2. Principal Place of Business 312 Washington Ave		3. Mailing Address P.O. Box 1141			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		04282004 Chg-P CR2E034 (10/03)	
City & State Gulf Breeze FL		City & State Gulf Breeze FL		4. FEI Number 20-0098204	
Zip 32561		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAUL, JOHN D 209 N. MADISON DR. PENSACOLA, FL 32505		7. Name and Address of New Registered Agent Name Bracey, William D Street Address (P.O. Box Number is Not Acceptable) 312 Washington Ave City Gulf Breeze FL Zip Code 32561			
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 <u><i>William D Bracey</i></u> (NOTE: Registered Agent signature required when reinstating) DATE <u>4-30-04</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 MAUL, JOHN D 209 N. MADISON DR. PENSACOLA, FL 32505 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President-Director Bracey, William D 312 Washington Ave Gulf Breeze FL 32561 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP of Operations Block, Bryan 4311 Bayou Blvd. # P-165 Pensacola, FL 32503 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP of Painting Davis, WDB 4-30-04 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP of Painting Smith, Davis 206 N. Madison Dr. Pensacola, FL 32505 <input type="checkbox"/> Delete		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"/> Delete		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: <u><i>William D Bracey</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>4-30-04</u> <small>Date Daytime Phone #</small>		

Attachment

14017895

#P03000074960



Panhandle Home Services, Inc.

P.O. Box 1141
312 Washington Ave.
Gulf Breeze, FL 32562
Office: 850-934-4100
Fax: 850-934-9500

March 1, 2004

To Whom It May Concern:

I, John D. Maul, do hereby with this letter, resign from and relinquish all my rights to the company known and operating as Panhandle Home Services, Inc. of the above mentioned address.

I hereby relinquish all 50 shares of stock in the company to Mr. William Duncan Bracey, co-owner of Panhandle Home Services, Inc.

All assests and liabilities of Panhandle Home Services, Inc. are hereby also relinquished to William D. Bracey exclusively.

All contracts, deposits, and balances due for work to be performed hereby become the sole property and ownership of William D. Bracey.

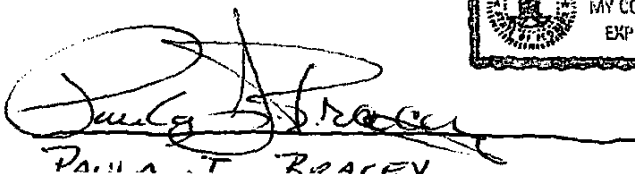
All tooling and material now belonging to Panhandle Home Services, Inc. do also become the property and owned by Panhandle Home Services, Inc. other than what was decided to be relinquished to John D. Maul.

It is also agreed that whatever forms shall be needed to file with any government agency, shall be handled by William D. Bracey and the companies accountant to consummate the full and final dissolution of co-ownership of John D. Maul from Panhandle Home Services, Inc.

This resignation shall become effective this date at 11:59 pm.


John D. Maul

WITNESSED 3-1-04


WILLIAM D. BRACEY

