

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P03000085270



1. Entity Name  
BETTER PROPERTY SOLUTIONS, INC.

Principal Place of Business  
8434 SHADY GLEN DRIVE  
ORLANDO, FL 32819

Mailing Address  
8434 SHADY GLEN DRIVE  
ORLANDO, FL 32819

**FILED  
May 01, 2008 08:00 AM  
Secretary of State**



03312008 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0205372	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

RONAN, NICHOLAS K  
8434 SHADY GLEN DRIVE  
ORLANDO, FL 32819

**DO NOT WRITE  
IN THIS SPACE**

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

NICHOLAS K. RONAN

4-27-08

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

000000940417  
05/28/08-80066-011 150.00

10. OFFICERS AND DIRECTORS

TITLE D  
NAME RONAN, NICHOLAS K  
STREET ADDRESS 8434 SHADY GLEN DRIVE  
CITY-ST-ZIP ORLANDO, FL 32819

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

NICHOLAS K. RONAN 4-27-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #