


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90071 030 ***150.00

DOCUMENT # P03000127612

1. Entity Name
MAINTENANCE ON-CALL INC.



Principal Place of Business Mailing Address

7680 CAMBRIDGE MANOR PL P.O. BOX 60195
SUITE 101 FORT MYERS, FL 33906
FORT MYERS, FL 33919

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

12631 Westlinks Dr
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Fort Myers FL
Zip Country Zip Country

33913 U.S.

40074433



01152008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For

72-1574750 Not Applicable

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

6. Name and Address of Current Registered Agent

WAYLAND, TERRY R JR
7680 CAMBRIDGE MANOR PL
STE 101
FORT MYERS, FL 33906

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

12631 Westlinks Dr, Suite 7
Fort Myers
City FL Zip Code 33913

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 *Terry Wayland* TERRY Wayland 4-18-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending) 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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAYLAND, TERRY R JR	NAME	
STREET ADDRESS	P.O. BOX 60195	STREET ADDRESS	
CITY - ST - ZIP	FORT MYERS, FL 33906	CITY - ST - ZIP	
TITLE	SEC <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAYLAND, NICOLE	NAME	
STREET ADDRESS	P.O. BOX 60195	STREET ADDRESS	
CITY - ST - ZIP	FORT MYERS, FL 33906	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

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: *Terry Wayland* TERRY Wayland 4-18-08 239-275-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #