## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000008184

FILED Mar 30, 2009 Secretary of State

Entity Name: ADVANCED HOME REPAIR AND MAINTENANCE INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1272 CONE AVE PALM BAY, FL 32907	7			
Current Mailing Add	dress:	New Mailing Address	s:	
8504 HORSESHOE A PALM BAY, FL 32909				
FEI Number: 20-0753719	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
CRIPPEN, MICHAEL 8504 HORSESHOE A				
PALM BAY, FL 32909 The above named enting the State of Florida.	9 US tity submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
PALM BAY, FL 32909 The above named enting the State of Floridate SIGNATURE:	9 US tity submits this statement for the			
PALM BAY, FL 32909 The above named enting the State of Floridal SIGNATURE: Elec	9 US tity submits this statement for the		d office or registered agent, or both,  Date	
PALM BAY, FL 32909 The above named enting the State of Floridate SIGNATURE: Election Campaign Finar	g US  tity submits this statement for the  tronic Signature of Registered Ag  cing Trust Fund Contribution ( ).	ent		
PALM BAY, FL 32909 The above named enting the State of Floridal SIGNATURE:  Election Campaign Finar  OFFICERS AND DIR Title: Plane: CRIPPEN, Address: 8504 HORS	g US  tity submits this statement for the  tronic Signature of Registered Ag  cing Trust Fund Contribution ( ).	ent	Date	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E.CRIPPEN PRES 03/30/2009