

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015552

FILED
Feb 03, 2005
Secretary of State

Entity Name: EXCEPTIONAL HOME SERVICES, INC.

Current Principal Place of Business:

901 NW 45 AVE
COCONUT CREEK, FL 33066 US

New Principal Place of Business:

353 SUNSHINE DRIVE
COCONUT CREEK, FL 33066 US

Current Mailing Address:

901 NW 45 AVE
COCONUT CREEK, FL 33066 US

New Mailing Address:

353 SUNSHINE DRIVE
COCONUT CREEK, FL 33066 US

FEI Number: 80-0099016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOGLEMEN, THOMAS E JR.
901 NW 45 AVE
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

FOGLEMEN, THOMAS E JR.
353 SUNSHINE DRIVE
COCONUT CREEK, FL 33066 US

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.

SIGNATURE: THOMAS E FOGLEMAN JR

02/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOGLEMAN, THOMAS E JR.
Address: 901 NW 45 AVE
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOGLEMAN, THOMAS E JR.
Address: 353 SUNSHINE DRIVE
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: VP () Change (X) Addition
Name: FOGLEMAN, THOMAS E SR
Address: 353 SUNSHINE DRIVE
City-St-Zip: COCONUT CREEK, FL 33066

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS E FOGLEMAN JR

P

02/03/2005

Electronic Signature of Signing Officer or Director

Date