

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032879

FILED
Jan 30, 2005
Secretary of State

Entity Name: HOMEWATCHERS UNLIMITED OF PINELLAS, INC.

Current Principal Place of Business:

11624 GROVE ST.
SEMINOLE, FL 33772

New Principal Place of Business:

11375 WALKER AVENUE
SEMINOLE, FL 33772

Current Mailing Address:

11624 GROVE ST.
SEMINOLE, FL 33772

New Mailing Address:

11375 WALKER AVENUE
SEMINOLE, FL 33772

FEI Number: 11-3712161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODNER, KATHERINE A
11624 GROVE ST.
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

HARMAN, BARBARA C
11375 WALKER AVENUE
SEMINOLE, FL 33772 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: BARBARA C HARMAN

01/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: GOODNER, KATHERINE A
Address: 11624 GROVE ST.
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: HARMAN, BARBARA
Address: 11375 WALKER AVE.
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P,D (X) Change () Addition
Name: HARMAN, BARBARA
Address: 11375 WALKER AVE.
City-St-Zip: SEMINOLE, FL 33772

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: BARBARA C HARMAN

P

01/30/2005

Electronic Signature of Signing Officer or Director

Date