

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040898

FILED
Feb 14, 2008
Secretary of State

Entity Name: SINCLAIR HOME SERVICES, INCORPORATED

Current Principal Place of Business:

2350 DOCTOR IRA DRIVE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

3381 KNIGHT STREET
JACKSONVILLE, FL 32205

Current Mailing Address:

P O BOX 163
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

PO BOX 380064
JACKSONVILLE, FL 32005

FEI Number: 51-0537897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARETT, ROBERT S
2350 DOCTOR IRA DRIVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

MARETT, ROBERT S
3381 KNIGHT STREET
JACKSONVILLE, FL 32205 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:

02/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARETT, ROBERT S
Address: 2350 DOCTOR IRA DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VP () Delete
Name: MARETT, ROBERT S
Address: 2350 DOCTOR IRA DR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: MARETT, ROBERT S
Address: P O BOX 163
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S () Delete
Name: MARETT, ROBERT S
Address: P O BOX 163
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARETT, ROBERT S
Address: 3381 KNIGHT STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP (X) Change () Addition
Name: MARETT, ROBERT S
Address: 3381 KNIGHT STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: T (X) Change () Addition
Name: MARETT, ROBERT S
Address: 3381 KNIGHT STREET
City-St-Zip: JACKSONVILLE, FL 32005

Title: S (X) Change () Addition
Name: MARETT, ROBERT S
Address: 3381 KNIGHT STREET
City-St-Zip: JACKSONVILLE, FL 32205

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: /S/ ROBERT S. MARETT

PRES

02/14/2008

Electronic Signature of Signing Officer or Director

Date