

# 2005 FOR PROFIT CORPORATION

# Annual Report

APPROVED  
AND  
FILED

112

05 OCT 14 AM 11:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



10052005 REIN-P CR2E098 (6/04)

4. FEI Number **20-1191705** Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

KINKER, ERIC L  
1620 DALE CIRCLE STREET  
DUNEDIN, FL 34698

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 *Eric L. Kinker*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **10/11/2005**

**FILE NOW!!! FEE IS \$150.00**  
**After January 1, 2006, Fee will be \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## 10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	KINKER, ERIC L	
STREET ADDRESS	1620 DALE CIRCLE STREET	
CITY - ST - ZIP	DUNEDIN, FL 34698	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	WINEBRENNER, MICHAEL A	
STREET ADDRESS	1334 S. CANDLENUT AVENUE	
CITY - ST - ZIP	HOMOSASSA, FL 34448	
TITLE	S	<input type="checkbox"/> Delete
NAME	KINKER, LAURA D	
STREET ADDRESS	1620 DALE CIRCLE STREET	
CITY - ST - ZIP	DUNEDIN, FL 34698	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**4/18/05 90311018**  
**\$150.00**

**OCT 19 2005**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Eric L. Kinker* Eric L. Kinker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(727) 736-9038

2/2

October 5, 2005

Division of Corporations  
PO.Box 6327  
Tallahassee FL 32314

Re: Reinstatement - P04000085375 Citrus Building & Home Inspection, Inc.

To Whom It May Concern:

As per my conversation with a representative, the status for Citrus Building & Home Inspection, Inc. is inactive. We did not receive the reject letter dated April 26, 2005, as per the representative, requesting the FEI number.

I have attached a copy of the \$150.00 for the Annual Report Filing Fee to verify the fee was paid. If you have any other questions I can be contacted at 352-302.8602 or by correspondence at 1620 Dale Circle S Dunedin FL 34698.

Thank You,

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Eric L Kinker, President  
Citrus Building & Home Inspection, Inc.