

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 09, 2008 8:00 am
Secretary of State

09-09-2008 90002 029 ***158.75

DOCUMENT # P05000013466

1. Entity Name

SCHRADER HOME IMPROVEMENT SPECIALISTS, INC.



Principal Place of Business

357 6TH AVE. W.
BRADENTON FL 34205

Mailing Address

616 FONTANA LN
BRADENTON FL 34209



2. Principal Place of Business - No P.O. Box #

4550 47th St. W.

3. Mailing Address

4550 47th St. W.

Suite, Apt. #, etc

1926

Suite, Apt. #, etc.

1926

City & State

BRADENTON FL.

City & State

BRAD. FL.

Zip

34210

Country

USA

Zip

34210

Country

USA

1st MOORE

CR2E034 (10/07)

4. FEI Number

20-2228568

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHRADER, SCOTT E.
357 6TH AVE. W.
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name: SCOTT E. SCHRADER
Street Address (P.O. Box Number is Not Acceptable)

4550 47th St. W. #1926

City: BRADENTON

FL Zip Code 34210

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

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SCHRADER, SCOTT E.
STREET ADDRESS 616 FONTANA LANE
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 line employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 4 08

941 962 5801

ATTACHMENT

Sept. 4 08

40115457

#P05000013466

To Whom This May Concern

The Reason For My late Payment

IS I Moved From 616 Fontana lane
Brad. Fl. 34209

Dec. 28, 08 to 4550 47th St. W. #1926
Brad. Fl. 34210

All my Mail Was to Be Forwarded But

unfortunilly Some Items Were Never Delivered

and I was only recent That My Renewal

of copreations Was Just Brought to my

attention That The People at That address

Contacted Me with This Renewal along with

Other Mail.

Please accept This Payment

And Not Charge me late Fee

It was out of my Control

Sincerely

Albino