

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 8:00 am
Secretary of State

03-22-2006 90017 013 ***158.75

DOCUMENT # P05000038228 1. Entity Name STRONGMAN HOME INSPECTION CORPORATION																													
Principal Place of Business 838 BUGLE WAY LAKELAND, FL 33809			Mailing Address 838 BUGLE WAY LAKELAND, FL 33809																										
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
6. Name and Address of Current Registered Agent SNYDER, KENNETH 838 BUGLE WAY LAKELAND, FL 33809			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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointed)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;"> OWNER Kenneth Snyder 838 Bugle Way Lakeland FL 33809 </td> <td style="width: 20%; text-align: right; padding: 2px;"> ☐ Delete </td> </tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;"></td> <td style="width: 20%; text-align: right; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr><td style="padding: 2px;">NAME</td><td></td><td></td></tr> <tr><td style="padding: 2px;">STREET ADDRESS</td><td></td><td></td></tr> <tr><td style="padding: 2px;">CITY - ST - ZIP</td><td></td><td></td></tr> </table>						TITLE	OWNER Kenneth Snyder 838 Bugle Way Lakeland FL 33809	☐ Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Kenneth Snyder</i> Kenneth Snyder 3-20-06 863-398-8865 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																													