## FILED May 02, 2007 08:00 A Secretary of State

ANNUAL REPORT	IUI
DOCUMENT # P05000052433	
1. Entity Name	- 17
PHD HOME INSPECTIONS INC	- 13

6. Name and Address of Current Registered Agent



Principal Place of Business

**SIGNATURE:** 

Mailing Address

2567 MADRID WAY SOUTH ST PETERSBURG, FL 33712 2567 MADRID WAY SOUTH ST PETERSBURG, FL 33712

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5. Certificate of Status Desired

Not Applicable \$8.75 Additional

Fee Required

Applied For

JACKSON, EDDIE 2567 MADRID WAY SOUTH ST PETERSBURG, FL 33712

## DO NOT WRITE IN THIS SPACE

the above	named entity submits this statement for the prions of registered agent.	ourpose of changing its registere	d office or i	registered agent, or be	oth, in the State of Florida. I am familia	r with, and accept
SIGNATURE_						
	Signature, typed or printed name of registered agent and title	il applicable. (NOTE: Registered	Agent tegnatur	e required when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000754409 05/22/07-80060-004	150.00
10.	OFFICERS AND DIREC	CTORS	· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, EDDIE 2567 MADRID WAY SOUTH ST PETERSBURG, FL 33712					
TITLE NAME STREET ADDRESS CHY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
ITTLE NAME STREET ADORESS CITY-ST-ZIP						
of the corr	ertify that the information supplied with this fi on this report or supplemental report is true a obration or the receiver or trustee empowered or on an attachment with an address with all	ind accurate and that my signatu I to execute this report as requir	ıra ehali har	alto cama lanal offa	ct so if made under eath: that I am an .	afficer or director

OF SIGNING OFFICER OR DIRECTOR