

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079176

FILED  
Jan 10, 2009  
Secretary of State

Entity Name: ANDERSON INSPECTIONS, INC.

## Current Principal Place of Business:

8710 W. HILLSBOROUGH AVENUE  
#235  
TAMPA, FL 33615 US

## New Principal Place of Business:

## Current Mailing Address:

8710 W. HILLSBOROUGH AVENUE  
#235  
TAMPA, FL 33615 US

## New Mailing Address:

FEI Number: 01-0809011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, DAVID E  
6321 NEWTOWN CIRCLE B1  
TAMPA, FL 33615 US

## Name and Address of New Registered Agent:

ANDERSON, DAVID E  
4540 BOWL STREET  
NEW PORT RICHEY, FL 34652 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: DAVID E ANDERSON

01/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ANDERSON, DAVID E  
Address: 6321 NEWTOWN CIRCLE B1  
City-St-Zip: TAMPA, FL 33615 US

Title: VSD ( ) Delete  
Name: LORAN, DEBRA  
Address: 6321 NEWTOWN CIRCLE B1  
City-St-Zip: TAMPA, FL 33615 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ANDERSON, DAVID E  
Address: 4540 BOWL STREET  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VSD (X) Change ( ) Addition  
Name: ANDERSON, KYLE D  
Address: 2035 PHILIPPE PKW #73  
City-St-Zip: SAFETY HARBOR, FL 34695 US

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: DAVID E ANDERSON

PTD

01/10/2009

Electronic Signature of Signing Officer or Director

Date