

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101422

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: A-Z PROFESSIONAL HOME INSPECTIONS, INC

## Current Principal Place of Business:

441 DEL PRADO BLVD  
SUITE 1  
CAPE CORAL, FL 33904

## New Principal Place of Business:

3210 SUNSHINE BLVD S  
SUITE 1  
LEHIGH ACRES, FL 33971

## Current Mailing Address:

441 DEL PRADO BLVD  
SUITE 1  
CAPE CORAL, FL 33904

## New Mailing Address:

3210 SUNSHINE BLVD S  
SUITE 1  
LEHIGH ACRES, FL 33971

FEI Number: 20-3169666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEE-WILLIAMS, STACY  
160 GRANT BLVD  
LEHIGH ACRES, FL 33936 US

## Name and Address of New Registered Agent:

LEE-WILLIAMS, STACY  
3210 SUNSHINE BLVD S  
LEHIGH ACRES, FL 33971 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: STACY LEE-WILLIAMS

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEE-WILLIAMS, STACY  
Address: 441 DEL PRADO BLVD  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEE-WILLIAMS, STACY  
Address: 3210 SUNSHINE BLVD S  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the 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: STACY LEE-WILLIAMS

P

04/05/2006

Electronic Signature of Signing Officer or Director

Date