

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000154918

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** PRECISION HOME & PROPERTY INSPECTIONS, INC.

**Current Principal Place of Business:**

596 WINDRIDGE PLACE  
TAVARES, FL 32778 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 882  
TAVARES, FL 327780882 US

**New Mailing Address:**

**FEI Number:** 20-3828806

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MITCHELL, MICHAEL  
596 WINDRIDGE PLACE  
TAVARES, FL 32778 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MITCHELL, MICHAEL  
Address: 596 WINDRIDGE PLACE  
City-St-Zip: TAVARES, FL 32778 US

Title: VD  
Name: MITCHELL, LAUREN H  
Address: 596 WINDRIDGE PLACE  
City-St-Zip: TAVARES, FL 32778 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J MITCHELL

OWNE

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date