

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000062200

**Entity Name:** ACCURATE INSPECTORS, INC.

**FILED**  
**Jun 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

110 E. GRANADA BLVD.  
SUITE 205  
ORMOND BEACH, FL 3216

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 157  
ORMOND BEACH, FL 32175

**New Mailing Address:**

**FEI Number:** 20-4870554

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOLODZIK, DAVID E  
114 FIESTA CIRCLE  
ORMOND BEACH, FL 32174 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:** PSTD  
**Name:** KOLODZIK, DAVID E  
**Address:** 110 E. GRANADA BLVD.  
**City-St-Zip:** ORMOND BEACH, FL 32176

**Title:** VP  
**Name:** GIACCONE, RAMON M  
**Address:** 13 SMITH TRAIL  
**City-St-Zip:** PALM COAST, FL 32164

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:** DAVID E. KOLODZIK

PRES

06/28/2011

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

\_\_\_\_\_  
Date