

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109710

FILED
Apr 21, 2008
Secretary of State

Entity Name: FIRST CHOICE HOME INSPECTORS, INC.

Current Principal Place of Business:

8138 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

6344 ROWAN ROAD
NEW PORT RICHEY, FL 34653 US

Current Mailing Address:

8138 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653

New Mailing Address:

6344 ROWAN ROAD
NEW PORT RICHEY, FL 34653 US

FEI Number: 20-5425605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDAK, THOMAS
8138 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

HUDAK, THOMAS
6344 ROWAN ROAD
NEW PORT RICHEY, FL 34653 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:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: HUDAK, THOMAS
Address: 8138 MASSACHUSETTS AVE.
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: HUDAK, THOMAS
Address: 6344 ROWAN ROAD
City-St-Zip: NEW PORT RICHEY, FL 34653

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: THOMAS HUDAK

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

Date