

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027808

FILED
Apr 27, 2009
Secretary of State

Entity Name: UNITED HOME INSPECTORS & ASSOCIATES, INC.

Current Principal Place of Business:

380 SOUTH STATE ROAD 434
SUITE 1004-264
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

3114 NEIL RD.
APOPKA, FL 32703

Current Mailing Address:

380 SOUTH STATE ROAD 434
SUITE 1004-264
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

3114 NEIL RD.
APOPKA, FL 32703

FEI Number: 32-0199232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAISONET, JAIME
3114 NEIL ROAD
APOPKA, FL 32703 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAISONET, JAIME
Address: 380 SOUTH STATE ROAD 434
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: P () Delete
Name: MAISONET, SCHAELE
Address: 380 SOUTH STATE ROAD 434
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAISONET, JAIME
Address: 3114 NEIL RD
City-St-Zip: APOPKA, FL 32703

Title: P (X) Change () Addition
Name: MAISONET, SCHAELE
Address: 3114 NEIL RD
City-St-Zip: APOPKA, FL 32703

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: JAIME MAISONET

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date