

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90027 012 ***158.75

DOCUMENT # P07000117461

1. Entity Name
PENNER HOME INSPECTIONS INC.



Principal Place of Business

651 DORAL LANE
MELBOURNE, FL 32940 US

Mailing Address

651 DORAL LANE
MELBOURNE, FL 32940 US

2. Principal Place of Business - No P.O. Box #

234 Country Club Dr.
Suite, Apt. #, etc.

3. Mailing Address

234 Country Club Dr.
Suite, Apt. #, etc.



01142008

Chg-P

CR2E034 (12/06)

4. FEI Number

26-1849565

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 33612-3425

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **PENNER, SIDNEY**
STREET ADDRESS **651 DORAL LANE**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **T** ☐ Delete
NAME **PENNER, SIDNEY**
STREET ADDRESS **651 DORAL LANE**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **S** ☐ Delete
NAME **PENNER, SIDNEY**
STREET ADDRESS **651 DORAL LANE**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **D** ☐ Delete
NAME **PENNER, SIDNEY**
STREET ADDRESS **651 DORAL LANE**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **Penner Sidney**
STREET ADDRESS **234 Country Club Dr**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **T** ☒ Change ☐ Addition
NAME **Penner, Sidney P.**
STREET ADDRESS **234 Country Club Dr.**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **S** ☒ Change ☐ Addition
NAME **Penner Sidney**
STREET ADDRESS **234 Country Club Dr.**
CITY-ST-ZIP **Melbourne FL 32940**

TITLE **D** ☒ Change ☐ Addition
NAME **Penner Sidney**
STREET ADDRESS **234 Country Club Dr.**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/08

(321) 704-0092