

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117750

FILED
Jul 07, 2008
Secretary of State

Entity Name: HOWELL PROPERTY INSPECTION & REPAIRS, INC.

Current Principal Place of Business:

2115 CAVALLA ROAD
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

2115 CAVALLA ROAD
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 26-1316514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERLEW, MICHAEL
2213 E ATLANTIC BLVD
POMPANO BEACH, FL 33062 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOWELL, TIMOTHY
Address: 2115 CAVALLA ROAD
City-St-Zip: VERO BEACH, FL 32963

Title: VPD () Delete
Name: HOWELL, LETHA
Address: 2115 CAVALLA ROAD
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LETHA HOWELL

VPD

07/07/2008

Electronic Signature of Signing Officer or Director

Date