

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000082437

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

**Entity Name:** DON WIMBISH HOME INSPECTIONS, INC.

**Current Principal Place of Business:**

6525 THOROUGHBRED LOOP  
ODESSA, FL 33556

**New Principal Place of Business:**

87 1ST AV NW  
LUTZ, FL 33548

**Current Mailing Address:**

6525 THOROUGHBRED LOOP  
ODESSA, FL 33556

**New Mailing Address:**

87 1ST AV NW  
LUTZ, FL 33548

FEI Number: 27-1118572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WIMBISH, JAMES DONALD  
6525 THOROUGHBRED LP  
ODESSA, FL 33556 US

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

WIMBISH, JAMES DONALD  
87 1ST AV NW  
LUTZ, FL 33548 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/28/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WIMBISH, JAMES DONALD  
Address: 87 1ST AV NW  
City-St-Zip: LUTZ, FL 33548

Title: VP  
Name: WIMBISH, DONNA J  
Address: 87 1ST AV NW  
City-St-Zip: LUTZ, FL 33548

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: JAMES DONALD WIMBISH

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

PRES

04/28/2011

\_\_\_\_\_  
Date