FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FILED Feb 20 1998 8:00am Secretary of State

BILL SU	COTT'S HOME INSP	ECTION SERVICE, II	NC.			A MARKARIA KARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARAN ARANTARA
Principal Place		Maifing Add				
732 HEATHROW AVE LADY LAKE FL 32159 LADY LAKE FL 32159						
						DO NOT WRITE IN THIS SPACE
						3. Date incorporated or Qualified 08/05/1996
2. Principal Pi	ace of Business	2a. Mailing A	2a. Mailing Address			4, FEI Number Applied For
21		26				59-3392105 Not Applicable
Suite, Apt.	#, etc.	 	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22 City & Ctot			City & State			Fee Required
City & State	9	├ ─┐ ´	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
23 Zip	28		Country		This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tex due June 30. Yes No
24		of Current Registered Age		 -		10. Name and Address of New Registered Agent
SC	OTT, WILLIAM G	-	-	81	Name	
	HEATHROW AVE			82	Ctroot A	Address (P.O. Box Number is Not Acceptable)
	OY LAKE FL 32159			62	Street A	Address (P.O. Box Mulliper is Not Acceptable)
				83		
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of re	egistered agent and title if applicable CERS AND DIRECTORS	(NOTE: Rec	<u> </u>	nt signature r	required when reinstating) DATE
12.	PT		DELETE	13.	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	SCOTT, WILLIAM G	_	, 0022112	1.2 NAME		
STREET ADDRESS	732 HEATHROW AVE			1.3 STREET	ADDRESS	
CITY-ST-ZIP	LADY LAKE FL			1.4 CITY-S		
TITLE	VPS		DELETE	2.1 TITLE		Change Addition
NAME	SCOTT, LAURETTA J			2.2 NAME	l	·
STREET ADDRESS	732 HEATHROW AVE			2.3 STREET	ADDRESS	
CITY-ST-ZIP	LADY LAKE FL			2. 4 CITY - S	ST-ZIP	
TITLE			DELETÉ	3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADORESS	
CITY-ST-ZIP	•			3.4. CITY-S	ST - ZIP	
TITLE			DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			l.	4. 2 NAME	ļ	
STREET ADDRESS			I	4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY-S	T-ZIP	
TITLE			DELETE	5.1 TITLE	}	Change Addition
NAME			1	5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	Deleve .	5.4 CITY-S	T-ZIP	
TITLE		L.	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET		
CITY-ST-ZIP		a real and are record		6.4 CITY-S	T-ZIP	dia Davis 440 07(0)(i) Fasida Ostala 15 mb. and 6 de dia 1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.