7-18-97 16-2052 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000091948 (5)

MAPLE LEAF INSPECTION SERVICES, INC.

FILED Feb 18 1997 8:00am Secretary of State

| Principal Place of Business Mailing Address 200 LADY SUSAN COURT CASTLEBERRY FL 32707 CASTLEBERRY FL 32707 CASTLEBERRY FL 32707-4624 | | | | | |
|---|--------------------------------------|---|---|---|------------------------------------|
| | | | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 2. Principal Pi | lace of Business | 2a. Mailing Address | | 11/07/1996 4. FEI Number | Applied For |
| 21 24 A | Moutland Contr Pk | 14 26 2400 Maitk | and Cotto Pkw | | 3493 Not Applicable |
| Suite, Apt. | #, etc | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 Suit | e 315 | 27 Suffe 315 | · · · · · · · · · · · · · · · · · · · | <u> </u> | Fee Required |
| City & State | itland, FL | 28 Martland. | FL | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip > 4 | Country | 8. This corporation has liability for | |
| 24 327 | 15 1 25 USH | 29 32751 3 | OUSA | Florida Statutes | Yes No |
| | 9. Name and Address of Currer | nt Registered Agent | 81 Name - | 10. Name and Address of New Re | gistered Agent |
| | NEY, RICHARD H ESQ | | | van Feldman | Esg. |
| | EAST KENNEDY BLVD TE 3170 | | 82 Street Addre | ess (P.O. Box Number is Not Acceptal | |
| | 1E 3170 APA FL 33802 | | 83 | | <u> </u> |
| 1750 | MFA FL 33002 | | <u> </u> | irte 802 | T |
| | | | 84 City Sou | th Miami | FL 85 3374/3 |
| 11. Pursuant | to the provisions of Sections 607 05 | of Florida Statutes, | the above-named corp | oration submits this statement for the poor's board of directors. I hereby acce | purpose of changing its registered |
| agent. La | m familiar with, and accept the one | iations of section dol. 0303, Fidilic | Ja Siaidies, | _ | pi the appointment as registered |
| SIGNATURE | / ~ M | | M. FELOMA | N Esz | 1/31/57 |
| 12. | | ent and tipe if applicable (NOTE: FID DIRECTORS | registered Agent signature require | ADDITIONS/CHANGES TO OFFI | TERS AND DIRECTORS IN 12 |
| TITLE | PSD | DELETE | 1.1 TILLE | ADDITIONS/CHANGES TO OFFIC | Change Addition |
| NAME | MCPHERSON, VICKI | | 1.2 NAME | | |
| STREET ADORESS | 200 LADY SUSAN COURT | | 1.3 STREET ADDRESS | | |
| CITY-SI ZIP | CASTLEBERRY FL 32707 | | 1.4 CITY-ST-ZIP | | |
| TITLE | VTD | ☐ DELETE | 21 TITLE | | Change Addition |
| NAME | GEORGE, JOHN | | 2.2 NAME | | |
| STREET ADDRESS | 200 LADY SUSAN COURT | | 2.3 STREET ADDRESS | | |
| CITY+ST-ZIP | CASTLEBERRY FL 32707 | - Drutt | 2. 4 CITY - ST - ZIP | | Character T Addition |
| TITLE ' | | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS CITY - ST - ZIP | | | 3.3 STREET ADDRESS 3.4. CHTY+ST-ZIP | | |
| TITLE THE | | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| OTHER CARGINESS I | | | ■ ******* | | |
| CITY-ST-7IP | | | 4.4 CITY - ST - ZIP | | |
| | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE | | Change Addition |
| CITY-ST-7IP | | ☐ DELETE | | | Change Addilion |
| CITY-ST-7IP TITLE | | ☐ DELETE | 5.1 TITLE | | Change Addilion |
| CITY+ST-7/P TIBLE NAME | | | 5.1 TITLE 5.2 NAME | | |
| CITY-ST-ZIP THLE NAME STREET ADDRESS | | ☐ DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | | Change Addition |
| CITY-ST-7(P TIBLE NAME STREET ADDRESS CITY-ST-7(P | | | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP | | |
| CITY-ST-7IP THLE NAME STRETT ADDRESS CITY-ST-2IP THLE | | | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | | |

14. I do 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.

CICNIATUDE.

John George

2/14/97

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