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FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000026536 (7)

1. Corporation Name
PREMIER HOME MAINTENANCE, INC.



Principal Place of Business
31 NW POULTON DRIVE
FT. WALTON BEACH FL 32548

Mailing Address
31 NW POULTON DRIVE
FT. WALTON BEACH FL 32548

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
03/19/1997

2. Principal Place of Business
21 1015 HOLTON AVE.
Suite, Apt. #, etc.

2a. Mailing Address
26 1015 HOLTON AVE
Suite, Apt. #, etc.

4. FEI Number
59-38435905
Applied For
Not Applicable

22 City & State
23 FT. WALTON BEACH, FL.

27 City & State
28 FT. WALTON BEACH, FL.

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

24 32547 25 U.S.A.

29 32547 30 U.S.A.

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

KLINE, KEITH
31 NW POULTON DRIVE
FT. WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name
KEITH KLINE
82 Street Address (P.O. Box Number is Not Acceptable)
1015 HOLTON AVE.
83
84 City
FT. WALTON BEACH, FL 85 Zip Code
32547

11. Pursuant to the provisions of Sections 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 Keith Kline KEITH KLINE CORP. PRESIDENT 4/21/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D KLINE, KEITH
STREET ADDRESS 31 NW POULTON DRIVE
CITY-ST-ZIP FT. WALTON BEACH FL 32548

TITLE ☐ DELETE
NAME D WYNN, DAPHNE O
STREET ADDRESS 31 NW POULTON DRIVE
CITY-ST-ZIP FT. WALTON BEACH FL 32548

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

CP2E034 (10/97)