

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000041116

1. Entity Name

EAGLE EYE HOME INSPECTION SERVICES, INC.

**FILED**  
**Apr 23, 2000 8:00 am**  
**Secretary of State**

04-23-2000 90055 011 \*\*\*150.00

Principal Place of Business

Mailing Address

15853 TRAIL RIDGE CT  
JACKSONVILLE FL 32234

15853 TRAIL RIDGE CT  
JACKSONVILLE FL 32234-2802

2. Principal Place of Business

3. Mailing Address

3340 WILDERNESS CIRCLE

3340 WILDERNESS CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Middleburg FL

Middleburg FL

Zip

Country

Zip

Country

32068-4128

32068-4128

4. FEI Number 59-3448141

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRY, JOHN G III  
1719 BLANDING BOULEVARD  
JACKSONVILLE FL 32210

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP  
NAME KRAUER, ROBERT M  
STREET ADDRESS 15853 TRAIL RIDGE COURT  
CITY-ST-ZIP BALDWIN FL 32234 ☐ Delete

TITLE DP  
NAME KRAUER, ROBERT M.  
STREET ADDRESS 3340 WILDERNESS CIRCLE  
CITY-ST-ZIP Middleburg FL 32068-4128 ☐ Change ☐ Addition

TITLE DVS  
NAME KRAUER, MARGARET F  
STREET ADDRESS 15853 TRAIL RIDGE COURT  
CITY-ST-ZIP BALDWIN FL 32234 ☐ Delete

TITLE DVS  
NAME KRAUER, MARGARET F.  
STREET ADDRESS 3340 WILDERNESS CIRCLE  
CITY-ST-ZIP Middleburg FL 32068-4128 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert M. Krauer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

Date

904-291-7077

Daytime Phone #

CR2E034 (9/99)