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 # P97000086754 (3)

B&C	HOME INSPECTIONS INC.				
Principal Plac	e of Business	Mailing Address		{	1 10110 01111 10801 01111 0101 1301
9010 55TH WY N 9010 55TH WY N					
PINELLAS PARK FL 33782 PINELLAS PARK FL 3378.		?	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	113 STACE
				10/07/1997	
2. Principal Place of Business 2a. Mailing Address		·	4. FEI Number	Applied For	
21		26			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & Plate			Fee Required
23	ы	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	<u>├</u> ─┐ `	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre			10. Name and Address of New Register	red Agent
HO	DGES, PAUL S		B1 Name		
409 PEGASUS AVE S			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 33765					· · · · · · · · · · · · · · · · · · ·
			83		
1			84 City		85 Zip Code
Pursuant to the provisions of Sections 607 0502 and 607,1508, Florida Statutes, the office or registered agent, or both, in the State of Florida, Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida State.					
11. Pursuant office or r	to the provisions of Sections 607.05t ealstered agent, or both, in the State	02 and 607,1508, Florida Statute ⊾of Florida, Such change was a	es, the above-named corp authorized by the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the	se of changing its registered appointment as registered
agent. I a	m familiar with, and account the oblic	ations of, Section 607.0505, Flo	rida Statutes.	201	Plas
SIGNATURE	_ Olm J	1 mg-	: Registered Agent signature requir		PR 98
12.	Signature, typed or printed name of registered ag OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIDECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITIONAL CHARGES TO CITTOENS	Change Addition
NAME	OALMANN, WILLIAM		1.2 NAME		• –
STREET ADDRESS	9010 55TH WY N		1.3 STREFT ADDRESS		
CITY-ST-ZIP	PINELLAS PARK FL 33782		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	MASSEY, CHARLES F		2.2 NAME		
STREET ADDRESS	7013 HOLLOWELL DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33635		2.4 CITY - ST - ZIP		
TITLE	D	DELETE		Q	☐ Change ☐ Addition
NAME :	PAUL S HOUGES			PANL S HODGES	
STREET ADDRESS	409 S PEGASUS				
CITY-ST-ZIP	CLEARWAILE !	2 33765	3.4. CITY - ST - ZIP	CLEARWAIER PL .	33765
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		•
CITY - ST - ZIP		Droper	4.4 City - St - ZiP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME OTREST ADDRESS			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition
			6.1 TITLE		C Cuange Manifoli
NAME Street address			6.2 NAME 6.3 STREET ADDRESS		
SINECL AUUNCOO			■ 0.0 0 INCCL NDUKE00 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 change or or an attachment with an address.

SIGNATURE:

28 MR 98

(813)461-5824

FILED

May 05 1998 8:00am

Secretary of State