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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000067653

1. Corporation Name

FERRELL HOME IMPROVEMENT & MAINTENANCE, INC.

Principal P ace of Business	Mailing Address	
15 HALL ROAD IALABAR FL 32950	615 HALL ROAD MALABAR FL 32950	
		3.
2. Principal Place of Business	2a. Mailing Address	4.
21 615 Hall Road	26 615 Hall Road	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
22	27	5.
City & State	City & State	6.
Malahar, FL	Malabar, FL	

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90298 028 ***150.00



					IIB	IKO DI KID TOKOK KOKK BOKIN D	ONE BUILDING	IN BEILE LOUIS BLED	A ENIGO NAS ADDA
Principal P ace		Mailing Address							
615 HALL ROAL		615 HALL ROAD							
MALABAR FL 32950		MALADAN FL 3233U	MALABAR FL 32950		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed				
					07/30/				
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Num			A	pplied For
	5 Hall Road	26 615 Hall Ro	a.d.		50	-3534457_		N/	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.						\$8.75	Additional
	_ 1	27			5. Certificat	e of Status Desired		Fee R	equired
City & State		City & State			6. Election	Campaign Financing		\$5.00	May Be
	labar, FL	Malabar, F	L			nd Contribution		Added	to Fees
Zip	Courtry	Zip	Country	'	8. This cor	oration owes the cur	rent year l	ntangible	
329	50 25 USA	29 32950 30] บ	SA	Persona	Property Tax.	-	☐Yes	□No
	9. Name and Address of Curre				10. Name a	nd Address of New	Registere	d Agent	
			81	Name					
	RELL, ERIC A		82	Street Aria	trees (P.O. Box N	lumber is Not Accep	lable)		
	HALL ROAD		62	Sueet A(10	.ii ess (F.∪. b∪) l'	iumber is Not Acceb	ranie)		
MAL	ABAR FL 32950		83	 					
			_						
			84	City			F	85 Zip	Code
SIGNATURE	m familiar with, and accept the obligation of th				red when reinstating)		DATE		
12.	OFFICERS A	N() DIRECTORS	13.		ADDITIO	IS/CHANGES TO O	FICERS		OFIS IN 12
TITLE	D	☐ DELETE	1.1 TITLE					Change	Addition
NAME	FERRELL, ERIC A		12 NAME						
STREET ADDRESS	615 HALL ROAD		1.3 STREE	T ADDRESS					
ÇITY-ST-ZIP	MALABAR FL 32950		1.4 CITY-S	T-ZIP					
TITLE	D	☐ DELETE	21 TITLE					Change	Addition
NAME	FERRELL, KAREN		2.2 NAME	İ					
STREET ADDRESS	615 HALL ROAD		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	MALABAR FL 32950		2. 4 CITY-5	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME			3.2 NAME						
STREET ADDRE 3S			3.3 STREE	T ADDRESS					
CITY-ST-ZIP			3 4. CITY- 9	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-S						
TITLE		☐ DELETE	51 TITLE					☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					
TITLE		DELETE	61 TITLE					Change	Addition
NAME			6.2 NAME	j					
			6.3 STREE	T ADDRESS					
STREET ADDRESS			6.4 CITY-S						
CITY-ST-ZIP			0.4 011113	,. <u>-</u>					

CITY-ST-ZIP 14. 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, with a light empowered.

(407)