

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000102896

1. Entity Name

BANYAN HOME INSPECTION SERVICE, INC.

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

05-03-2000 90049 009 \*\*\*150.00

Principal Place of Business

Mailing Address

~~900 RIVIERA STREET~~  
VENICE FL 34285

~~900 RIVIERA STREET~~  
VENICE FL 34285-0491

2. Principal Place of Business

1144 Deardon Dr.  
Suite, Apt. #, etc.

3. Mailing Address

1144 Deardon Dr.  
Suite, Apt. #, etc.

City & State

Venice, FL

City & State

Venice, FL

Zip

34292

Country

Sarasota

Zip

34292

Country

Sarasota

4. FEI Number

65-0881162

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HAGEN, CRAIG D  
900 RIVIERA STREET  
VENICE FL 34285

7. Name and Address of New Registered Agent

Name

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

1144 Deardon Dr

City

Venice

FL

Zip Code

34292

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

*Craig D. Hagen*

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

(NOTE: Registered Agent signature required when reinstating)

4/22/00

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

TITLE D  
NAME HAGEN, CRAIG ☐ Delete  
STREET ADDRESS ~~900 RIVIERA STREET~~  
CITY-ST-ZIP ~~VENICE FL 34285~~

TITLE Sec. + Treasurer  
NAME Elizabeth A. Hagen ☐ Delete  
STREET ADDRESS 1144 Deardon Dr  
CITY-ST-ZIP Venice, FL 34292

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1144 Deardon Dr  
CITY-ST-ZIP Venice, FL 34292

TITLE Secretary + Treasurer  
NAME Elizabeth A. Hagen ☐ Change ☒ Addition  
STREET ADDRESS 1144 Deardon Dr  
CITY-ST-ZIP Venice, FL 34292

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

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

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

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

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:

*Craig D. Hagen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/00  
Date

941-496-7733  
Daytime Phone #