

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027177

1. Entity Name

UNIVERSAL HOME INSPECTION, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90049 049 ***150.00

Principal Place of Business

437 HEMLOCK ST
ALTAMONTE SPRINGS FL 32714

Mailing Address

437 HEMLOCK ST
ALTAMONTE SPRINGS FL 34420-8608

2. Principal Place of Business

10 A NORTH PARK AVE

Suite, Apt. #, etc.

3. Mailing Address

10 A NORTH PARK AVE

Suite, Apt. #, etc.

City & State

APOPKA FL

City & State

APOPKA, FL

4. FEI Number

59-3568983

Applied For

Not Applicable

Zip

32703

Country

Zip

32703

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANCIS, VICKI
437 HEMLOCK ST
ALTAMONTE SPRINGS FL 32714

7. Name and Address of New Registered Agent

Name

FRANCIS, VICKI

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

10 A NORTH PARK AVE

City

APOPKA

FL

Zip Code

32703

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

TITLE ☐ Delete
NAME D
STREET ADDRESS FRANCIS, VICKI
CITY-ST-ZIP 437 HEMLOCK ST
ALTAMONTE SPRINGS FL 32714

TITLE ☐ Delete
NAME D
STREET ADDRESS FUGATE, DEBORAH
CITY-ST-ZIP 437 HEMLOCK ST
ALTAMONTE SPRINGS FL 32714

TITLE ☐ Delete
NAME D
STREET ADDRESS HIX, AMY
CITY-ST-ZIP 437 HEMLOCK ST
ALTAMONTE SPRINGS FL 32714

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 D
STREET ADDRESS Robert Odom
CITY-ST-ZIP 1976 Piedmont Park Blvd
Apopka, FL 32703

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

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: *Robert T. Odom* Robert T. Odom Director 3-22-00 407-884-6811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #