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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S51429

(6)

FLORIDA HOME INSPECTIONS & CONSTRUCTION, INC.

Principal Place of Business Mailing Address							(10041010 104 01	181 HQ11 BID18 71819 IR1	ı dibit bibli t		Mai mimi (M#)	
5368 FOX RUN SARASOTA FL	•		5368 FOX RUN ROAD SARASOTA FL 34231-7316						•			
							3. Date Incorpo 05/08/1991	rated or Qualified		ate of Las 29/1990		_
2. Principal P	lace of Business	2a. Mailing Address			····		4. FEI Number				Applied For	
21		26					65-02620	93			Not Applicable	e
Suite, Apt		Suite, Apt. #, etc.	27				5. Certificate of Status Desired Security Securi					
City & State	e	City & State	ê '				6. Election Cam		F1	•)0 May Be	
23	Country	28 Zip		ountry			Trust Fund Co				ed to Fees	_
Zip Country 24 25		29	30				8. This corporation has liability for in Florida Statutes			Yes No		
	9. Name and Address of Curre	nt Registered Agent			,		10. Name and A	ddress of New R	egistered	Agent		
WAL	sh, robert			81	Nar	ne						
	FOX RUN ROAD			82	Stre	et Addr	ess (P.O. Box Numb	er is Not Accepta	able)			
SAR	ASOTA FL 34231			83								
											· · · · · · · · · · · · · · · · · · ·	
				84	City	'			FL	85 Z	ip Code	
office or r agent. La	to the previsions of Sections 607.05 eg.stered agent, or both, in the Stat im familiar with, and accept the obliq	e of Florida. Such change w	as authoriz	ed by	z the i	ed corp corporat	oration submits this ion's board of direct	statement for the ors. I hereby acco	purpose o ept the app	f changin pointment	g its registered as registered	j
SIGNATURE	Signature, typed or printed harne of registered ap-	pent and title if applicable i	(NOTE: Registe	red Age	ngia Ine	ature requir	ed when reinstating)		DATE			
12.	*	ND DIRECTORS	13	•			ADDITIONS/C	HANGES TO OFFI	CERS AND			_
TILF	PVTS DELETE			TITLE						Chan	ge [_] Addition	n
NAME	WALSH, ROBERT			NAME								
STREET ADORESS	5368 FOX RUN ROAD SARASOTA FL			STREET		SS						
CITY-ST-ZIP	SANASOIR FL	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE					···	Chang	ge [Addition	 n
NAME					2.2 NAME							
STREET ADDRESS			2.3	STREET	ADORE	ss						
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NAME			5.2	NAME								
STREET ADORESS			5.3	STREET	ADDRE	ss						
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THE		DELETE		TITLE						L Chan	ge [] Additio	13
NAME STREET ADDRESS			•	NAME STREET	ያስከው፤	۱ ء						

64 CITY-ST-ZIP 14. I do 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.

SIGNATURE:

FILED

Mar 27 1997 8:00am

Secretary of State