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Mar 16, 1999 8:00 am Secretary of State

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CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$51429

FLORIDA HOME INSPECTIONS & CONSTRUCTION, INC.

Principal Place of Business Mailing Address					(JII 88818 87817 8	J121) E1811 1961	
5368 FOX RUN	I ROAD	5368 FOX RUN ROAD	5368 FOX RUN ROAD					
SARASOTA FL	34231	SARASOTA FL 34231	RASOTA FL 34231			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed	JI AOL	
						05/08/1991		
2. Procupal F	Place of Business	2a. Mailing Address				4. FEI Number	Ac	oplied For
						65-0262093	<u> </u>	ot Applicable
21 26							\$8.75	Additional
22						5. Certifcate of Status Desired	Fee Re	oquired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
28						Trust Fund Contribution	Added	to Fees
Zip				ntry		This corporation owes the current year Into		
24	25	29 30				Personal Property Tax.	Yes	□No
	9. Name and Address of Cu	rrent Registered Agent		81	Name	10. Name and Address of New Registered	rgent	
WAI	LSH, R obe rt			01	Maille			
5368 FOX RUN ROAD				82	Street Addre	ess (P O. Box Number is Not Acceptable)		
SARASOTA FL 34231				83				
				03	ļ			
İ				84	City	FI	85 Zip (Code
44 6	the New provinces of Continue CO7	0502 and 607 1508 Florida 5	Statutes the a	201/6	a-named corn	oration submits this statement for the purpose of	changing its	registered
office or i	registered agent, or both, in the S	tate of Florida Such change v	vas authorized	by	the corporation	on's board of directors. I hereby accept the appoin	itment as re	gistered
agent La	am familiar with, and accept the ob	oligations of, Section 607.0503	s, Fiorida Statt	nes	•			
SIGNATURE	Signature, typed or printed name of registere	d arient and title if applicable	(NOTE Registered	Agen	nt signature required	d when reinstating) DATE		
12.		S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		_
TITLE	PVTS DELETE		Έ 1 τη	1 1 TITLE			☐ Change	Acdition
NAME	WALSH, ROBERT		12 NA	ME				
STREET ADDRESS			13 ST	REET	T ADDRESS			
CITY-ST-ZIP	SARASOTA FL		1.4 CI	TY-S	T-ZIP			
TITLE		☐ DELE	ΓE 2.1 T∃1	LE			Change	Addition
NAME			22 NA	ME				
STREET ADDRESS	3		N -		TADDRESS			
CITY-ST-ZIP					ST-ZIP		Change	Addition
TITLE		☐ DELE	` `				Change	Addition
NAME			32 NA					
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NAME					T ADDRESS			
STREET ADDRESS	5		333,	· LL	ADDINESO			

CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

61 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(DELETE

FEB 21,1999

☐ Change

Addition