

FILED
Jul 04, 2002 8:00 am
Secretary of State

05-29-2002 93599 038 ***150.00

2002
2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S91025

1. Entity Name

COMPREHENSIVE TOWER INSPECTION, INC.

Principal Place of Business

6 EAGLE LANE
Palm Harbor, FL 34683

Mailing Address

P.O. Box 39
OZONA, FL 34660

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

593095161

Applied For

Not Applicable

6. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Warmouth, Ellsworth F. Jr.
6 Eagle Lane
Palm Harbor, FL 34683

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)☐10. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	Director/Treasurer ☐ Delete
NAME	Warmouth, Ellsworth F., Jr.
STREET ADDRESS	6 Eagle Lane, Palm Harbor, 34683
CITY- ST- ZIP	

TITLE	Vice President ☐ Delete
NAME	Tom West
STREET ADDRESS	118 Stonemell Dr., Madison, MS 39110
CITY- ST- ZIP	

TITLE	President ☐ Delete
NAME	Rachelle Warmouth
STREET ADDRESS	6 Eagle Lane, Palm Harbor, FL 34683
CITY- ST- ZIP	

TITLE	Secr ☐ Delete
NAME	Frishe, James C.
STREET ADDRESS	6617 Blue Heron, St. Petersburg, FL 33707
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	
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	

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 807, 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

Rachelle Warmouth, President 5-1-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rachelle WARMOUTH, President

CR25034 (11/00)