

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000003042

FILED  
May 06, 2009  
Secretary of State

Entity Name: HOME SOURCE PRODUCTS INC.

## Current Principal Place of Business:

9972 HORSE CREEK RD.  
FORT MYERS, FL 33913

## New Principal Place of Business:

## Current Mailing Address:

14 WOODINGTON CRESCENT  
ST. CATHARINES, ONTARIO  
CANADA L2T 3T7, XX

## New Mailing Address:

14 WOODINGTON CRESCENT  
ST. CATHARINES, ON L2T 3T7 CA

FEI Number: 26-1714734

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NICHOLS, JAMES L  
8191 COLLEGE PARKWAY  
#204  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MASON, BRIAN D  
Address: 14 WOODINGTON CRESCENT  
City-St-Zip: ST. CATHARINES, ON L2T 3T7

Title: STD ( ) Delete  
Name: MASON, STEPHEN J  
Address: 4 VISCOUNT PLACE  
City-St-Zip: ST. CATHARINES, ON L2N 2N3

Title: VD (X) Delete  
Name: MCCULLOUGH, CHRISTOPHER G  
Address: 41 COLONIAL CRESCENT  
City-St-Zip: GRIMSBY, ON L3M 5H2

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: MASON, STEPHEN J  
Address: 31 SAWMILL RD. UNIT 2  
City-St-Zip: ST. CATHARINES, ON L2N 2N3

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN MASON

PRES

05/06/2009

Electronic Signature of Signing Officer or Director

Date