2000 UNIFORM BUSINESS RÉPORT (UBR) FILED Feb 01, 2000 8:00 am Secretary of State DOCUMENT # 591525 1. Entity Name HOMESURE OF AMERICA, INC. 02-01-2000 90066 022 ***150.00 Mailing Address Principal Place of Business P O BOX 551540 400 SAWGRASS CORPORATE PWY FT LAUDERDALE FL 33355-1540 SUNRISE FL 33325 2. Principal Place of Business 3. Mailing Address 1625 N.W. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. <u>Ste. axo</u> Applied For City & State 4. FEI Number City & State 59-1855827 Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required <u> 33323</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STARTE CYNTHIA STARRETT Street Address (P.O. Box Number is Not Acceptable) 400 SAWGRASS CORPORATE PWY 136 Ave. Ste. 200 SUNRISE FL 33325 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 (NOTE: Registered Age FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE **Change** Addition TITLE ☐ Delete HARTHAUSEN, KENNETH NAME 1625 n.w. 136 H Are., Ste. 200 NAME **400 SAWGRASS CORPORATE PWY** STREET ADDRESS STREET ADDRESS FL. LANDERDANE FL 33323 CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33325 Addition TITLE ☐ Delete TITLE STARRETT, CYNTHIA NAME 1625 n.w. 136 & Ave, Se. 200 400 SAWGRASS CORPORATE PWY STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SUNRISE FL 33325 TITLE WOLK, HOWARD NAME NAME 1625 n.w. 136 HAR, 54.20 400 SAWGRASS CORPORATE PWY STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33303 CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33325 ☐ Change Addition 💢 Delete TITLE TITLE SANdia C Finn NAME ROTHMAN, EVAN NAME 1625 n.w. 1364 Ave. 54. 200 400 SAWGRASS CORPORATE PKWY STREET ADDRESS STREET ADDRESS SUNRISE FL 33325 CITY-ST-ZIP 77. Laudendalle XL 33823 CITY-ST-ZIP ☐ Change X Addition ☐ Delete TITLE L. Ashley Colle 1625 N.W. 136 Ave., Ste-200 NAME STREET ADDRESS STREET ADDRESS 4. Louderdale 7L 33303 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR