


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 591525</b> 1. Entity Name HOMESURE OF AMERICA, INC.	
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Principal Place of Business 1625 NW 136TH AVE STE 200 FORT LAUDERDALE, FL 33323 US	Mailing Address P O BOX 551540 FT LAUDERDALE, FL 33355--154 US
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DO NOT WRITE IN THIS SPACE



03202008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1855827	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

JUDGES, ROBERT  
 1625 NW 136TH AVE, STE 200  
 FORT LAUDERDALE, FL 33323

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IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

DATE  
 04/10/08-80078-023 150.00

10. OFFICERS AND DIRECTORS	
TITLE	DV
NAME	WOLK, HOWARD L
STREET ADDRESS	1625 NW 136TH AVE STE 200
CITY-ST-ZIP	FT LAUDERDALE, FL 33323
TITLE	S
NAME	JUDGES, ROBERT W
STREET ADDRESS	1625 NW 136TH AVE, STE 200
CITY-ST-ZIP	FORT LAUDERDALE, FL 33323
TITLE	P
NAME	FINN, SANDRA C
STREET ADDRESS	1625 NW 136TH AVE., STE 200
CITY-ST-ZIP	FORT LAUDERDALE, FL 33323
TITLE	V
NAME	COKE, L. ASHLEY
STREET ADDRESS	1625 NW 136TH AVE., STE 200
CITY-ST-ZIP	FORT LAUDERDALE, FL 33323
TITLE	D
NAME	WOLK, SIDNEY D
STREET ADDRESS	1625 NW 136TH AVE, STE 200
CITY-ST-ZIP	FORT LAUDERDALE, FL 33323
TITLE	D
NAME	WOLK, JEFFREY C
STREET ADDRESS	1625 NW 136TH AVE, STE 200
CITY-ST-ZIP	FORT LAUDERDALE, FL 33323

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Judges      3/25/08      954-845-2325  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #