

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000638

FILED
Jan 09, 2007
Secretary of State

Entity Name: HOME EQUITY OF AMERICA, INC.

Current Principal Place of Business:

1000 EAST 80TH PLACE
NORTH TOWER
MERRILLVILLE, IN 46410

New Principal Place of Business:

Current Mailing Address:

38 FOUNTAIN SQUARE PLAZA
MD10AT76
CINCINNATI, OH 45263

New Mailing Address:

FEI Number: 31-1707549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: SCHAEFER, GEORGE A JR.
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: EVP () Delete
Name: KABAT, KEVIN T
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: AS () Delete
Name: MORRIS, GWEN
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: AS () Delete
Name: PAUL, THERESE M
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: SVP () Delete
Name: HUBBARD, JAMES R
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: AVP () Delete
Name: SOVA, GREGORY
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: THERESE PAUL

AS

01/09/2007

Electronic Signature of Signing Officer or Director

Date