

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000000766

1. Entity Name
HOME RETENTION SERVICES, INC.



Principal Place of Business

1980 POST OAK BLVD
SUITE 300
HOUSTON, TX 77056

Mailing Address

1980 POST OAK BLVD
SUITE 300
HOUSTON, TX 77056

FILED
Aug 04, 2008 08:00 AM
Secretary of State



07232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
47-0941826

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
O'NEILL, DONALD
1980 POST OAK BLVD SUITE 300
HOUSTON, TX 77056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PLISOWSKI, CYNTHIA
1980 POST OAK BLVD SUITE 300
HOUSTON, TX 77056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LUGAR, KAREN SUZANNE
1980 POST OAK BLVD SUITE 300
HOUSTON, TX 77056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000957127
08/04/08-80010-018 550.00

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-23-08

Date

(713) 625-8376

Daytime Phone #

KAREN S. LUGAR, SECRETARY