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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HOMEOWNERS MARKETING PLAN INC  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAVID BAILEY  
(Name of Person)

HOMEOWNERS MARKETING PLAN INC  
(Firm/Company)

280 WEST MAIN STREET  
(Address)

SAYVILLE, NEW YORK 11782  
(City/State and Zip code)

For further information concerning this matter, please call:

DAVID BAILEY at (631) 589-3600  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. HOMEOWNERS MARKETING PLAN INC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/31/1988 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 280 WEST MAIN ST SAYVILLE NEW YORK 11782  
(Principal office address)

280 WEST MAIN ST SAYVILLE NEW YORK 11782  
(Current mailing address)

8. MORTGAGE BROKER  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: DALE W. CLARK JR

Office Address: 2400 SE FEDERAL HIGHWAY SUITE 220  
STUART, Florida 34994  
(City) (Zip code)

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Dale W. Clark Jr.  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: DAVID BAILEY

Address: 3 EASTOVER ROAD  
SABVILLE NEW YORK 11782

Vice Chairman: DAVID BAILEY

Address: 3 EASTOVER ROAD  
SAYVILLE NEW YORK 11782

Director: DAVID BAILEY

Address: 3 EASTOVER ROAD  
SAYVILLE NY 11782

Director: DAVID BAILEY

Address: 3 EASTOVER ROAD  
SABVILLE NY 11782

**B. OFFICERS**

President: DAVID BAILEY

Address: 3 EASTOVER RD  
SABVILLE NEW YORK 11782

Vice President: DAVID BAILEY

Address: 3 EASTOVER RD  
SAYVILLE NEW YORK 11782

Secretary: DAVID BAILEY

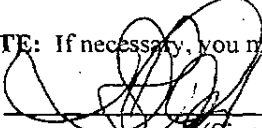
Address: 3 EASTOVER RD

Treasurer: DAVID BAILEY

Address: 3 EASTOVER RD

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SECRETARY  
TALLAHASSEE, FLORIDA

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  (Signature of Director or Officer listed in number 12 of the application)

14. DAVID S. BAILEY OWNER  
(Typed or printed name and capacity of person signing application)

**State of New York**  
**Department of State** } **ss:**

I hereby certify, that the Certificate of Incorporation of HOMEOWNERS MARKETING PLAN, INC. was filed on 08/31/1988, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 10/08/1993.

A Biennial Statement was filed 07/31/1996.

A Biennial Statement was filed 08/14/1998.

A Biennial Statement was filed 09/19/2000.

A Biennial Statement was filed 07/25/2002.

A Biennial Statement was filed 09/01/2004.

I further certify, that no other documents have been filed by such Corporation.



\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 08th day of August  
two thousand and five.

Secretary of State