

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007457

FILED
May 09, 2007
Secretary of State

Entity Name: HOMEOWNER SAFETY VALVE COMPANY

Current Principal Place of Business:

835 MAIN STREET
BRIDGEPORT, CT 06604

New Principal Place of Business:

Current Mailing Address:

835 MAIN STREET
BRIDGEPORT, CT 06604

New Mailing Address:

FEI Number: 20-0170573

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: FIRLOTTE, CHARLES V
Address: 835 MAIN STREET
City-St-Zip: BRIDGEPORT, CT 06604

Title: DP () Delete
Name: NEATON, DANIEL A
Address: 835 MAIN STREET
City-St-Zip: BRIDGEPORT, CT 06604

Title: DVST (X) Delete
Name: MORRISSEY, DONALD J
Address: 835 MAIN STREET
City-St-Zip: BRIDGEPORT, CT 06604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DPST (X) Change () Addition
Name: MORRISSEY, DONALD J
Address: 835 MAIN STREET
City-St-Zip: BRIDGEPORT, CT 06604

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

I hereby certify that the information supplied with this filing does not qualify 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: DONALD J. MORRISSEY

DPST

05/09/2007

Electronic Signature of Signing Officer or Director

Date