2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: HOMESALES, INC. OF DELAWARE

Current Principal Place of Business:

3415 VISION DR
COLUMBUS, OH 43219

New Principal Place of Business:

Current Mailing Address:

194 WOOD AVE S
2ND FLOOR
ISELIN, NJ 08830

New Mailing Address:

FEI Number: 20-1460767 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND DR
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: D
Name: SHEPHERD, LISA A
Address: 7301 BAYMEADOWS WAY, FLOOR 02
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: BERENS, JOHN J
Address: 7301 BAYMEADOWS WAY
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: DAVIS, MARK W
Address: 8333 RIDGEPOINT DRIVE, FLOOR 1
City-St-Zip: IRVING, TX 75063

Title: S
Name: HARRIS, LAUREN V
Address: 194 WOOD AVENUE SOUTH, FLOOR 2
City-St-Zip: ISELIN, NJ 08830

Title: T
Name: BARREN, JOHN
Address: 3415 VISION DRIVE, FLOOR 2
City-St-Zip: COLUMBUS, OH 43219

Title: P
Name: SHEPHERD, LISA A
Address: 7301 BAYMEADOWS WAY, FLOOR 02
City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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 all other like empowered.

SIGNATURE: LAUREN V. HARRIS S 03/09/2011

Electronic Signature of Signing Officer or Director — Date