

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000926

FILED
Aug 30, 2008
Secretary of State

Entity Name: HOMESTEAD ABSTRACT INC.

Current Principal Place of Business:

463 MONTAUK HWY
WEST SLIP, NY 11795

New Principal Place of Business:

463 MONTAUK HWY
WEST ISLIP, NY 11795

Current Mailing Address:

463 MONTAUK HWY
WEST SLIP, NY 11795

New Mailing Address:

463 MONTAUK HWY
WEST ISLIP, NY 11795

FEI Number: 20-5573387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHERSON, KEVIN S
3213 W BAY VILLA AVE
TAMPA, FL 33611 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: CPS () Delete
Name: MATHERSON, GEOFFREY S
Address: 463 MONTAUK HWY
City-St-Zip: WEST SLIP, NY 11795

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GEOFFREY S. MATHERSON

CPS

08/30/2008

Electronic Signature of Signing Officer or Director

Date