## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

HOMEOWNERS WAREHOUSE, INC.

**FILED** May 20 1998 8:00am Secretary of State

Ь_											<b>#</b>		
Principal Place of Business Mailing Address										V.0 2.2 0.0			
71	00 SERVIC	E MERCHANDI	SE DR	7100 SERVICE MERCHANDISE DR									
	O. BOX 24			P. O. BOX 24800									
NASHVILLE TN 37202				NASHVILLE TN 37202				DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualified 04/21/1982					
2.	2. Principal Place of Business			2a. Mailing Address				4. FEI Number		A	oplied For		
21				26				62-1168492		N	ot Applicable		
_	Suite, Apt #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional		
			27			5. Continuate of States Posited		Fee Re	equired				
	City & Stato			City & State				6. Election Campaign Financing		\$5.00	May Be		
23				28	· - 4 - ,			Trust Fund Contribution		bebbA	to Fees		
	Zip	ļ.	Country	Zip		Country		8. This corporation owes or has p	oaid the cu <u>r</u>				
24			25	29	30	)		Personal Property Tax due Jur			J No		
9, Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
			HALL CORPORATION	SYSTEM, INC.	•	81	Name						
1201 HAYS STREET						82 Street Address (P.O. Box Number is Not Acceptable)							
SUITE 105													
TALLAHASSEE FL 32301						63							
						84	City			ar Zin	Code		
						64	City		FL	85 Zip	Code		
11.	Pursuant	to the provision	ons of Sections 607,0502	and 607.1508, Fi	orida Statutes,	the above	-named	corporation submits this statement for the	purpose of	changing i	ts registered		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes.													
	•	an tarrence tree	t, and accept the congar		01.0300, 110170	o Giaidio							
SIG	NATURE	Signature, typodio	r printed isone of registered agent.	and little if applicable	(NOTE: FI	egistered Age	nt signaturi	e required when reinstating)	DATE				
12.			OFFICERS AND I			13,		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 12		
TITL	E	COBD		X	DELETE	1.1 FITLE				Change	Addition		
NAM	E	ZIMMERN	ran, raymond			1.2 NAME					ĺ		
STRE	ET ADDRESS	7100 SV	MERCHANDISE DR			1.3 STREET	ANDRESS	· ·					
	-ST-ZIP	BRENTW	OOD TN			1.4 City-S		-					
TITLE	***********	S		X	DELETE	2.1 TITLE	<u> </u>	Secretary		Change	Addition		
NAM		BODZY, (	GLEN			2.2 NAME		LC Charles Mance					
	ET ADDRESS		MERCHANDISE DR			2.3 STREET	*UUDEGG	1100 Service Merchandise ?	<u>۲</u> ،				
		BRENTW				t		Brentwood, TN 37027			ŀ		
TITLE	-ST-ZIP	VP		···-	DELETE	2. 4 CITY - S 3.1 TITLE	11-ZIP	PLENCENCOS. 114 214		Change	Addition		
NAM		CUSANO	. SAM			3.2 NAME					radiiioii		
	1		MERCHANDISE DR				4 DADECO				1		
	ET ADDRESS	BRENTW				3.3 STREET							
TITU	- ST-ZIP	J. (211) 11		N)	DELETE	3.4. CITY - S 4.1 TITLE	1-214	12		Change	Addition Addition		
		ADAMe	DONNA (ASST.)	(A)	שננוונ			Treasurer		C Change	Addition		
NAM			MERCHANDISE DR			4. 2 NAME		Thomas Garrett 1100 Service Merchandise D	r				
	ET ADDRESS	BRENTW				4.9 STREET			•		ł		
	-ST-ZIP	PD	000 III		DELETE	4.4 CITY-S	- ZIP	Brentwood, TN 37027		Channe	- Addition		
TITLE	j	9	SADV	LJ	DELETE	51 TITLE				Change	Addition		
NAM		WITKIN,				52 NAME							
STAE	ET ADDRESS		MERCHANDISE DR			5.3 STREET	ADDRESS				1		
CITY	-ST-ZIP	BRENTW	או עטט	····		5.4 CITY - S	- ZIP	<u> </u>					
TITLE					DELETE	6.1 TITLE		ASSISTANT SECRETARY		Change	X Addition		
NAM	E					6.2 NAME		Marc Hamilton					
STRE	ET ADDRESS					6.3 STREET	ADDRESS	2100 SVC Mare Dr					
CITY	-ST-ZIP					6.4 CITY - S	r-ZIP	Brentwood TN 37027					
		- 100 at 1 at 1	* * * * * * * * * * * * * * * * * * * *	1.7 1 2.5			<del> </del>	11.0 11.410.45(0)(0) 57.11.0.11			<del></del>		

supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information oplomental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an attachment with an address. indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if changes

MARC HAMILTON

(615)660-3971