

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000623

Entity Name: HOMEGOODS, INC.

FILED  
Apr 02, 2007  
Secretary of State

## Current Principal Place of Business:

770 COCHITUATE ROAD  
FRAMINGHAM, MA 01701

## New Principal Place of Business:

## Current Mailing Address:

770 COCHITUATE ROAD  
ATTN: CORP TAX DEPT J55  
FRAMINGHAM, MA 01701 US

## New Mailing Address:

FEI Number: 04-3183269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SMITH, ALEX  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA 01701

Title: VT ( ) Delete  
Name: REYNOLDS, MARY  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA

Title: S ( ) Delete  
Name: MCCAULEY, ANN  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA 01701

Title: V ( ) Delete  
Name: APPEL, ALFRED  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA

Title: V ( ) Delete  
Name: NAYLOR, JEFFREY  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA 01701

Title: V ( ) Delete  
Name: KANGAS, PAUL  
Address: 770 COCHITUATE RD  
City-St-Zip: FRAMINGHAM, MA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NAN, STUTZ  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA 01701

Title: VT (X) Change ( ) Addition  
Name: REYNOLDS, MARY B  
Address: 770 COCHITUATE ROAD  
City-St-Zip: FRAMINGHAM, MA

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ALFRED APPEL

V

04/02/2007

Electronic Signature of Signing Officer or Director

Date