

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17537

FILED
Jan 23, 2009
Secretary of State

Entity Name: THE H.O.M.E. FOUNDATION, INC.

Current Principal Place of Business:

11309 SW 167 TERRACE
C/O GOMPERS, GAYE J.
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11309 SW 167 TERRACE
C/O GOMPERS, GAYE J.
MIAMI, FL 33157

New Mailing Address:

FEI Number: 59-2769677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMPERS, GAYE J
11309 SW 167 TERRACE
MIAMI, FL 33157 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: DP () Delete
Name: GOMPERS, GAYE
Address: 11309 SW 167 TER
City-St-Zip: MIAMI, FL

Title: DV () Delete
Name: VAN KIRK, NATALIE
Address: 323 SUNSET LAKE BLVD.
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: NORMAN, BILLIE
Address: 6206 SUDBURY COURT
City-St-Zip: SOUTH BEND, IN 46614

Title: D () Delete
Name: NOONAN, ANNIE
Address: 361 MAHOGANY DR.
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GAYE GOMPERS

DP

01/23/2009

Electronic Signature of Signing Officer or Director

Date