

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90197 028 ***150.00

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1. Entity Name
HOME SWEET HOME FOUNDATION, INC.



Principal Place of Business
**5120 S.W. 22ND ST.
HOLLYWOOD, FL 33023**

Mailing Address
**5120 S.W. 22ND ST.
HOLLYWOOD, FL 33023**

40000000



DO NOT WRITE IN THIS SPACE

04142007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
65-0391285

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KREILING, EDWARD P
6151 MIRAMAR PARKWAY
STE. 101
MIRAMAR, FL 33023**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CT
ROBERTS, JR. H
5120 SW 22 STREET
HOLLYWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ROBERTS, ALFREDO
1428 SUSAN LANE
CARROLLTON, TX**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ROBERTS, MERCEDES
5120 SW 22ND STREET
HOLLYWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JACKSON, ALEXANDER
810 NW 179TH TERRACE
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
CLARK, I. S REV.
4411 SW 21ST STREET
HOLLYWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Howard Roberts
Howard Roberts

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-07 954 987 2283

Date

Daytime Phone #