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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

04 FEB 10 PM 5: 03

DOCUMENT # P00000075985			
1. Entity Name HOME ENERGY INC.			
Principal Place of Business 967 EL DORADO AVENUE CLEARWATER BEACH, FL 33767		Mailing Address 967 EL DORADO AVENUE CLEARWATER BEACH, FL 33767	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 01302004		Chg-P CR2E034 (10/03)	
5. Certificate of Status Desired 59-3680218		Applied For Not Applicable	
6. Name and Address of Current Registered Agent MEROLI, PETRIT 967 EL DORADO AVENUE CLEARWATER BEACH, FL 33767		7. Name and Address of New Registered Agent Name: Paul VonFeldt Street Address (P.O. Box Number is Not Acceptable) 612 Mandalay Ave City: Clearwater, FL Zip Code: 33767	
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: Paul VonFeldt DATE: 2-10-04			
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PSTD NAME: MEROLI, PETRIT STREET ADDRESS: 967 EL DORADO AVENUE CITY-ST-ZIP: CLEARWATER BEACH, FL 33767		TITLE: PSTD NAME: PAUL VON FELDT STREET ADDRESS: 967 EL DORADO AVENUE CITY-ST-ZIP: CLEARWATER BEACH, FL 33767	
TITLE: VP NAME: MEROLI, ZAIM STREET ADDRESS: 967 EL DORADO AVENUE CITY-ST-ZIP: CLEARWATER BEACH, FL 33767		TITLE: 200028782032 02/15/04--01011--027 **300.00	
TITLE: [Delete] NAME: [Delete] STREET ADDRESS: [Delete] CITY-ST-ZIP: [Delete]		TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]	
TITLE: [Delete] NAME: [Delete] STREET ADDRESS: [Delete] CITY-ST-ZIP: [Delete]		TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]	
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TITLE: [Delete] NAME: [Delete] STREET ADDRESS: [Delete] CITY-ST-ZIP: [Delete]		TITLE: [Change] [Addition] NAME: [Change] [Addition] STREET ADDRESS: [Change] [Addition] CITY-ST-ZIP: [Change] [Addition]	
12. I hereby certify that the information 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 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 607, 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: PAUL VON FELDT		2-10-04 727-442-6050	

COMPLETED HOME ENERGY.max