

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088628

FILED
Jan 13, 2005
Secretary of State

Entity Name: HOMELAND INTELLIGENCE TECHNOLOGIES, INC.

Current Principal Place of Business:

527 D STREET
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

873 WEST BAY DRIVE
217
LARGO, FL 33770

New Mailing Address:

FEI Number: 20-0250553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRELA, RICHARD S
100 PIERCE STREET
1101
CLEARWATER, FL 33755 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: CEO () Delete
Name: TRELA, RICHARD S
Address: 100 PIERCE STREET # 1101
City-St-Zip: CLEARWATER, FL 33755

Title: P () Delete
Name: DAMON, GARY M
Address: 873 WEST BAY DR. #217
City-St-Zip: LARGO, FL 33770

Title: VP () Delete
Name: MOORE, GREGORY
Address: 100 PIERCE STREET #404
City-St-Zip: CLEARWATER, FL 33755

Title: () Delete
Name:
Address:
City-St-Zip:

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: VP () Change (X) Addition
Name: WILDZUNAS, RICHARD P
Address: 129 NORTH SUNNYCREST DR.
City-St-Zip: LITTLE SILVER, NJ 07739

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY M. DAMON

P

01/13/2005

Electronic Signature of Signing Officer or Director

Date