2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009320

Address:

City-St-Zip:

3563 HOOVER LANE

JACKSONVILLE, FL 32277

FILED Apr 27, 2005 Secretary of State

Entity Nai	me: HOME RIG	GHT, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1205 MAYI JACKSON	ER DRIVE VILLE, FL 3221	1 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ITREE ROAD VILLE, FL 3227	7 US			
FEI Number:	20-0611614	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	New Registered Agent:	
1621 RIVE	S SUPPORT, IN R BREEZE DRI PARK, FL 3200	VE	ALLEN, TERI C 6187 RAINTREE ROAL JACKSONVILLE, FL 32		
	named entity su e of Florida.	ubmits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: TERIC. AL	LEN		04/27/2005	
Election Car		c Signature of Registered Againstered Against Fund Contribution ().	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DST ()[ALLEN, DAVID M 6187 RAINTREE JACKSONVILLE,	ROAD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	P ()[ALLEN, TERI C 6187 RAINTREE JACKSONVILLE,		Title: (Name: Address: City-St-Zip:)Change ()Addition	
Title: Name:	V (X) I NORTON, LYMAI	Delete N F	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: TERI C. ALLEN P 04/27/2005