2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009636

Entity Name: HOME FIELD ADVANTAGE, INC.

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1934 COMMERCE LANE 4286 OKEECHOBEE BOULEVARD SUITE 2 WEST PALM BEACH, FL 33409

JUPITER, FL 33458

JUPITER, FL 33458

New Mailing Address: Current Mailing Address:

1934 COMMERCE LANE 4286 OKEECHOBEE BOULEVARD SUITE 2 WEST PALM BEACH, FL 33409

FEI Number: 73-1691840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SELDIN, KEITH A DE STEFANO, ANTHONY L 1934 COMMERCE LANE 4286 OKEECHOBEE BOULEVARD SUITE 2 WEST PALM BEACH, FL 33409 JUPITER, FL 33458 US

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: ANTHONY DE STEFANO 01/13/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DESTEFANO, JEFFREY DE STEFANO, ANTHONY L Name: Name: 2601 PEPPERWOOD CIRCLE 4268 NORTHLAKE BLVD Address: Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D/VP (X) Change () Addition Title: () Delete Name: DESTEFANO, MATHEW Name: DE STEFANO, MATHEW J 4268 NORTHLAKE BLVD. 889 IMPERIAL LAKE ROAD Address: Address: PALM BEACH GARDENS, FL 33410 WEST PALM BEACH, FL 33413 City-St-Zip: City-St-Zip:

Title: Title: () Delete DMP () Change (X) Addition DE STEFANO, JEFFREY L Name: Name:

1716 NATURE COURT Address Address:

City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete Title: D/S () Change (X) Addition DE STEFANO, PATRICIA L Name: Name: Address: Address: 2601 PEPPERWOOD CIRCLE City-St-Zip: City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY DE STEFANO DNP 01/13/2006