2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059999

21228 POWELL ROAD

BROOKSVILLE, FL 34604

Address: City-St-Zip:

Entity Name: HOMEFACTS, INC

FILED Apr 18, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	WELL ROAD /ILLE, FL 3460-	4			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 1 BROOKS\	0263 /ILLE, FL 34603	3			
FEI Number	: 20-1019960	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
21228 PO\	ER, SUSAN L WELL ROAD /ILLE, FL 3460	4 US			
	named entity s e of Florida.	ubmits this statement for the	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D () WATSON, JOHN 21228 POWELL BROOKSVILLE,	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP/D () WOOLEVER, RA 21228 POWELL BROOKSVILLE,	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST/D () WOOLEVER, SU	Delete JSAN L	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SUSAN L. WOOLEVER ST/D 04/18/2007