

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000059999

Entity Name: HOMEFACTS, INC.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1115 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 10263  
BROOKSVILLE, FL 34603

**New Mailing Address:**

FEI Number: 20-1019960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOOLEVER, SUSAN L  
1115 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601 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

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: WATSON, JOHN S  
Address: 1115 SOUTH MAIN STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP/D  
Name: WOOLEVER, RAYMOND D  
Address: 1115 SOUTH MAIN STREET  
City-St-Zip: BROOKSVILLE, FL 34601

Title: ST/D  
Name: WOOLEVER, SUSAN L  
Address: 1115 SOUTH MAIN STREET  
City-St-Zip: BROOKSVILLE, FL 34601

I hereby 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 all other like empowered.

SIGNATURE: SUSAN WOOLEVER

ST/D

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date