## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000107500

Entity Name: HOME WARRIOR, INC.

FILED Mar 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1402 N. MANGONIA STREET 1017 CENTER STONE LANE WEST PALM BEACH, FL 33401 RIVIERA BEACH, FL 33404 US US **Current Mailing Address: New Mailing Address:** 1402 N. MANGONIA STREET 1017 CENTER STONE LANE WEST PALM BEACH, FL 33401 US RIVIERA BEACH, FL 33404 US FEI Number: 87-0731163 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ALFORD, CASSIE ALFORD, CASSIE 1017 CENTER STONE LANET 1402 N. MANGONIA STREET RIVIERA BEACH, FL 33404 WEST PALM BEACH, FL 33401 US 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: 03/28/2006 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 ALFORD, CASSIE ALFORD, CASSIE Name: Name: 1402 N. MANGONIA STREET 1017 CENTER STONE LANE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 US City-St-Zip: RIVIERA BEACH, FL 33404 US VΡ Title: VΡ (X) Change ( ) Addition Title: () Delete Name: PRESTON, LATOYA Name: CLARK, ANGELA 1402 N. MANGONIA DRIVE 1017 CENTER STONE LANE Address: Address: WEST PALM BEACH, FL 33401 US RIVIERA BEACH, FL 33404 US City-St-Zip: City-St-Zip: Title: Title: () Delete SEC ( ) Change (X) Addition LLOYD, KRISTIANA Name: Name: 5740 DEVONSHIRE Address Address: City-St-Zip: City-St-Zip: DETROIT, MI 48224 Title: () Delete Title: CPA ( ) Change (X) Addition PAFFORD, JOANNE Name: Name: Address: Address: 311 XANADU City-St-Zip: City-St-Zip: JUPITER, FL 33477

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: CASSIE CLARK-ALFORD P 03/28/2006