

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114241

FILED
Apr 30, 2009
Secretary of State

Entity Name: HOME PROPERTIES & ACQUISITIONS, INC.

Current Principal Place of Business:

10053 BRODBECK BLVD.
ORLANDO, FL 32832

New Principal Place of Business:

37 NORTH ORANGE AVE
SUITE 204
ORLANDO, FL 32801

Current Mailing Address:

10053 BRODBECK BLVD.
ORLANDO, FL 32832

New Mailing Address:

37 NORTH ORANGE AVE
SUITE 204
ORLANDO, FL 32801

FEI Number: 20-1477476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWIREN, L BRUCE ESQ.
1516 E. HILLCREST ST.
SUITE 305
ORLANDO, FL 32803 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SILVESTRI, JOE
Address: 10053 BRODBECK BLVD.
City-St-Zip: ORLANDO, FL 32832

Title: T/D () Delete
Name: POCKLINGTON, JEFFREY L
Address: 10228 POINTVIEW COURT
City-St-Zip: ORLANDO, FL 32836

Title: S/D () Delete
Name: POCKLINGTON, JEFFREY M
Address: 1135 HARVARD ST.
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T/D (X) Change () Addition
Name: POCKLINGTON, JEFFREY L
Address: 37 N ORANGE AVE SUITE 204
City-St-Zip: ORLANDO, FL 32801

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOE SILVESTRI

P/D

04/30/2009

Electronic Signature of Signing Officer or Director

Date