


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90839 012 ***150.00

DOCUMENT # P06000074985 1. Entity Name HOMEWISE PREFERRED INSURANCE COMPANY	
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Principal Place of Business 7785 66TH STREET PINELLAS PARK, FL 33781	Mailing Address 7785 66TH STREET PINELLAS PARK, FL 33781
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2. Principal Place of Business - No P.O. Box # 18302 Highwoods Reserve Pkwy Suite, Apt. #, etc. STE. 110 City & State TAMPA, FL Zip 33647 Country USA	3. Mailing Address 18302 Highwoods Reserve Pkwy Suite, Apt. #, etc. STE. 110 City & State TAMPA, FL Zip 33647 Country USA
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04222007 Chg-P CR2E034 (12/06)

4. FEI Number 20-4791515	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER, STATE OF FLORIDA THE CAPITOL TALLAHASSEE, FL 32399	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSE, WILLIAM E 4608 MEADOWWOOD ROAD DALLAS, TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 300 CRESCENT COURT, STE. 700 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AKHTAR, JAMIEL 6440 N DENTWOOD DALLAS, TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 300 CRESCENT COURT, STE. 700 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HART, TODD 5560 WANETA DRIVE DALLAS, TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 300 CRESCENT COURT, STE. 700 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMMOND, DALE 431 HAMBURG RD LYME, CT <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D/P 18302 Highwoods Reserve Pkwy., STE 110 TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALEY, DAVID 9002 DOUGLAS AVENUE DALLAS, TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 300 CRESCENT COURT, STE. 110 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition SEE ATTACHMENT

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEANIS F. PLATE, TRN 4/26/07 813-202-8612
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40093115

2007 FOR PROFIT CORPORATION
HOMEWISE PREFERRED INSURANCE COMPANY
DOCUMENT #P06000074985

BLOCK 11 ATTACHMENT

ADDITIONS:

TITLE	V
NAME	Sparkes, William I.
STREET ADDRESS	18302 Highwoods Preserve Pky., Ste. 110
CITY-ST-ZIP	Tampa, FL 33647
TITLE	T
NAME	Plante, Dennis F.
STREET ADDRESS	18302 Highwoods Preserve Pky., Ste. 110
CITY-ST-ZIP	Tampa, FL 33647
TITLE	S
NAME	Falcone, Diane E.
STREET ADDRESS	18302 Highwoods Preserve Pky., Ste. 110
CITY-ST-ZIP	Tampa, FL 33647