

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131362

FILED
Jan 10, 2009
Secretary of State

Entity Name: HOMESOURCE HOME MANAGEMENT INC.

Current Principal Place of Business:

4051 NE 13 AVENUE
68
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

4051 NE 13 AVENUE
68
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 20-5745542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MICHAEL
4051 NE 13 AVENUE
68
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

WILLIAMS, MICHAEL S
4051 NE 13 AVENUE
68
OAKLAND PARK, FL 33334 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: MICHAEL S WILLIAMS

01/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEMPSKI, SONJA
Address: 4051 NE 13 AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

Title: VP () Delete
Name: WILLIAMS, MICHAEL
Address: 4051 NE 13 AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: KEMPSKI, SONJA
Address: 4051 NE 13 AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

Title: P (X) Change () Addition
Name: WILLIAMS, MICHAEL S
Address: 4051 NE 13 AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

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: MICHAEL S WILLIAMS

P

01/10/2009

Electronic Signature of Signing Officer or Director

Date