

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075188

FILED
Apr 27, 2009
Secretary of State

Entity Name: HOME EXPERT SOLUTIONS, INC.

Current Principal Place of Business:

2567 SW CHESTNUT LANE
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

7718 SE FORK DR
STUART, FL 34997 US

Current Mailing Address:

2567 SW CHESTNUT LANE
PORT ST LUCIE, FL 34953

New Mailing Address:

7718 SE FORK DR
STUART, FL 34997

FEI Number: 33-1176305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POST, STEVEN P
2567 SW CHESTNUT LANE
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

POST, STEVEN P
7718 SE FORK DR
STUART, FL 34997 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: STEVEN POST

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POST, STEVEN P
Address: 2567 SW CHESTNUT LANE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: S () Delete
Name: STOGREN, WENDY
Address: 2567 SW CHESTNUT LANE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POST, STEVEN P
Address: 7718 SE FORK DR
City-St-Zip: STUART, FL 34997 US

Title: S (X) Change () Addition
Name: STOGREN, WENDY
Address: 7718 SE FORK DR
City-St-Zip: STUART, FL 34997 US

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: STEVEN POST

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date