2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000021016

Entity Name: HOMEOWNERSHIP PRESERVATION CORPORATION

FILED Dec 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6929 NW 113TH AVENUE 840 N. ORANGE AVENUE PARKLAND, FL 33076 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

6929 NW 113TH AVENUE 840 N. ORANGE AVENUE PARKLAND, FL 33076 ORLANDO, FL 32801

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TIMOTHY, LEZAMA

6929 NW 113TH AVENUE

PARKLAND, FL 33076 US

PRESCOTT, MICHAEL

840 N. ORANGE AVENUE

ORLANDO, FL 32801 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 PRESCOTT 12/04/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: LEZAMA, M TIMOTHY Name: PRESCOTT, MICHAEL

 Name:
 LEZAMA, M TIMOTHY
 Name:
 PRESCOTT, MICHAEL

 Address:
 6929 NW 113TH AVENUE
 Address:
 840 N. ORANGE AVENUE

 City-St-Zip:
 PARKLAND, FL 33076
 City-St-Zip:
 ORLANDO, FL 32801

Title: S (X) Delete Title: () Change () Addition

 Name:
 LEZAMA, TIMOTHY M
 Name:

 Address:
 6929 NW 113TH AVENUE
 Address:

 City-St-Zip:
 PARKLAND, FL 33076
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 LEZAMA, TIMOTHY M
 Name:

 Address:
 6929 NW 113TH AVENUE
 Address:

 City-St-Zip:
 PARKLAND, FL 33076
 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: MICHAEL PRESCOTT P 12/04/2009