

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000053825

FILED
Mar 12, 2009
Secretary of State

Entity Name: HOME SOLUTION TITLE INC.

Current Principal Place of Business:

4404 S. FLORIDA AVENUE
SUITE 9
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

4404 S. FLORIDA AVENUE
SUITE 9
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 26-2729414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEACOCK, RICHARD C SR
192 WIND MEADOWS DR
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

PEACOCK, RICHARD C SR
1912 WIND MEADOWS DR
BARTOW, FL 33830 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:

03/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEACOCK, RICHARD C SR
Address: 2393 EF GRIFFIN RD
City-St-Zip: BARTOW, FL 33830

Title: VPS () Delete
Name: WHITMORE, DANIEL
Address: 6445 MYRTLEWOOD DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: VPT () Delete
Name: MILAM, PATRICIA A
Address: 1303 HONEYTREE LANE E
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEACOCK, RICHARD C SR
Address: 1912 WIND MEADOWS DR
City-St-Zip: BARTOW, FL 33830

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

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: DANIEL WHITMORE

VPS

03/12/2009

Electronic Signature of Signing Officer or Director

Date