

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097901

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: ASSIST 2 SELL HOMETEAM REALTY, INC

## Current Principal Place of Business:

3749 CROWN POINT ROAD  
JACKSONVILLE, FL 32257 US

## New Principal Place of Business:

4371 LOSCO ROAD  
JACKSONVILLE, FL 32257 US

## Current Mailing Address:

4371 LOSCO ROAD  
JACKSONVILLE, FL 32257 US

## New Mailing Address:

4371 LOSCO ROAD  
JACKSONVILLE, FL 32257

FEI Number: 26-3636172

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, DAVID J  
4371 LOSCO ROAD  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HART, DAVID J  
Address: 3414 CORMORANT COVE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP ( ) Delete  
Name: HART, WENDY S  
Address: 3414 CORMORANT COVE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP (X) Delete  
Name: STINGONE, MARK J  
Address: 7850 JAMES ISLAND TRAIL  
City-St-Zip: JACKSONVILLE, FL 32256 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAVID J. HART

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date