## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000096019

Entity Name: RELIANT HOME WARRANTY CORPORATION

FILED May 03, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
50 RICHMOND STREET EAST SUITE 300 TORONTO ONTARIO M5C 1-N7 CANADA, XX			SUITE 700	AND BLVD. , ON M2J5C	1 CA	
Current Mailing Address:				New Mailing Address:		
50 RICHMOND STREET EAST SUITE 300 TORONTO ONTARIO M5C 1-N7 CANADA, XX				200 YORKLAND BLVD. SUITE 700		
				SUITE 700 TORONTO, ON M2J5C1 CA		
FEI Number: (	65-0656668	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LEXISNEXIS DOCUMENT SOLUTIONS, INC.						
1201 HAYS STREET TALLAHASSEE, FL 32301 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:						
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: Name: Address: City-St-Zip:	STEWART, ALE 3315 CROMPTO			Title: Name: Address: City-St-Zip:	HAMILTON, KE	ID BLVD SUITE 700
Title:	D ()	Delete		Title:	SD (X	() Change ( ) Addition
Name:	STONEHOUSE,	WALLACE		Name:	GUILIS, VALÈ	રા
Address: City-St-Zip:	619 AVENUE ROTORONTO, ON			Address: City-St-Zip:	TORONTO, ON	ID BLVD SUITE 700 I M2J 5C1 CA
Title: Name: Address: City-St-Zip:	D () NOVAK, NEIL 347 BAY ST ST TORONTO, ON			Title: Name: Address: City-St-Zip:	BOYD, SOUSS	ID BLVD SUITE 700
Title: Name: Address: City-St-Zip:	VD () STEWART, STE 18 BEVERLY S' TORONTO, ON	T UNIT 706		Title: Name: Address: City-St-Zip:	ROBERTS, JO	ID BLVD SUITE 700
Title: Name: Address: City-St-Zip:	SD (X) BOYD, L K 188 ROMAIN CI OAKVILLE, ON			Title: Name: Address: City-St-Zip:	(	) Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VALERI GUILIS SD 05/03/2005