

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096019

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: RELIANT HOME WARRANTY CORPORATION

## Current Principal Place of Business:

200 YORKLAND BLVD.  
SUITE 700  
TORONTO, ON M2J5C1

## New Principal Place of Business:

350 BAY STREET  
SUITE 250  
TORONTO, ON M5H2S6 CA

## Current Mailing Address:

200 YORKLAND BLVD. SUITE 700  
SUITE 700  
TORONTO, ON M2J5C1

## New Mailing Address:

350 BAY STREET  
SUITE 250  
TORONTO, ON M5H2S6 CA

FEI Number: 65-0656668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: PD ( ) Delete  
Name: HAMILTON, KEVIN  
Address: 200 YORKLAND BLVD SUITE 700  
City-St-Zip: TORONTO, ON M2J 5C1 CA

Title: SD ( ) Delete  
Name: GUILIS, VALERI  
Address: 200 YORKLAND BLVD SUITE 700  
City-St-Zip: TORONTO, ON M2J 5C1 CA

Title: D ( ) Delete  
Name: BOYD, SOUSSANA  
Address: 200 YORKLAND BLVD SUITE 700  
City-St-Zip: TORONTO, ON M2J 5C1 CA

Title: D (X) Delete  
Name: ROBERTS, JOHN  
Address: 200 YORKLAND BLVD SUITE 700  
City-St-Zip: TORONTO, ON M2J 5C1 CA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SOUSSANA, BOYD  
Address: 350 BAY STREET SUITE 250  
City-St-Zip: TORONTO, ON M5H2S6 CA

Title: D (X) Change ( ) Addition  
Name: BURDEN, PAUL  
Address: 250 BAY STREET SIUTE 250  
City-St-Zip: TORONTO, ON M5H2S6 CA

Title: D (X) Change ( ) Addition  
Name: ROBERTS, JOHN  
Address: 350 BAY STREET SUITE 250  
City-St-Zip: TORONTO, ON M5H2S6 CA

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BOYD SOUSSANA

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date