

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90005 020 ***150.00

DOCUMENT # P96000005486

1. Corporation Name

THE HOME ADVANTAGE SOUTHEAST, INC.

Principal Place of Business

3130 63RD AVENUE EAST
BRADENTON FL 34203

Mailing Address

3130 63RD AVENUE EAST
BRADENTON FL 34203

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/18/1995

4. FEI Number

65-0634512

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

HARRELL, DONALD J
1776 RINGLING BLVD.
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name ROBERT W. BROWNING, JR.
82 Street Address (P.O. Box Number is Not Acceptable)
1800 SECOND ST.
83 SUITE 880
84 City SARASOTA FL 85 Zip Code 34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	GREENBERG, RONALD C	
STREET ADDRESS	3130 63RD AVE. EAST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	GREENBERG, SUSAN W	
STREET ADDRESS	3130 63RD AVE. EAST	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	BECHICH, TAMARONN I	
STREET ADDRESS	3130 63RD AVENUE EAST	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	KNICKER, BOB	
STREET ADDRESS	3130 63RD AVENUE EAST	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	DANIEL T. SUZOR	
1.3 STREET ADDRESS	3130 63RD AVE EAST	
1.4 CITY-ST-ZIP	BRADENTON, FL 34203	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	KNICKER, ROBERT W.	
4.3 STREET ADDRESS	3130 63RD AVE EAST	
4.4 CITY-ST-ZIP	BRADENTON, FL 34203	
5.1 TITLE	V/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	SUZOR, JASON	
5.3 STREET ADDRESS	3130 63RD AVE EAST	
5.4 CITY-ST-ZIP	BRADENTON, FL 34203	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)