

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000081203

**Entity Name:** HOMESERVICES OF FLORIDA, INC.**Current Principal Place of Business:**333 SOUTH 7TH STREET  
27TH FLOOR  
MINNEAPOLIS, MN 55402**Current Mailing Address:**ATTN: LEGAL  
333 SOUTH 7TH STREET, 27TH FLOOR  
MINNEAPOLIS, MN 55402**FEI Number:** 20-0133249**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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**Officer/Director Detail :**

|                 |                                    |
|-----------------|------------------------------------|
| Title           | PRESIDENT, DIRECTOR                |
| Name            | PELTIER, RONALD J                  |
| Address         | 333 SOUTH 7TH STREET<br>27TH FLOOR |
| City-State-Zip: | MINNEAPOLIS MN 55402               |

|                 |                            |
|-----------------|----------------------------|
| Title           | VP                         |
| Name            | HALE, JONATHAN D           |
| Address         | 666 GRAND AVE<br>SUITE 500 |
| City-State-Zip: | DES MOINES IA 50309        |

|                 |                                    |
|-----------------|------------------------------------|
| Title           | DIRECTOR                           |
| Name            | STRANDMO, DANA D                   |
| Address         | 333 SOUTH 7TH STREET<br>27TH FLOOR |
| City-State-Zip: | MINNEAPOLIS MN 55402               |

|                 |                                    |
|-----------------|------------------------------------|
| Title           | SECRETARY                          |
| Name            | BROWNE, MICHAEL T                  |
| Address         | 333 SOUTH 7TH STREET<br>27TH FLOOR |
| City-State-Zip: | MINNEAPOLIS MN 55402               |

*I hereby 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 all other like empowered.*

**SIGNATURE: MICHAEL T. BROWNE****SECRETARY****04/16/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date