2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000081336

Entity Name: REALHOME SERVICES AND SOLUTIONS, INC.

FILED Feb 22, 2019 **Secretary of State** 5916571412CC

Current Principal Place of Business:

1000 ABERNATHY ROAD SUITE 245

ATLANTA, GA 30328

Current Mailing Address:

ATTN: CORPORATE SECRETARY 1000 ABERNATHY ROAD SUITE 200

ATLANTA, GA 30328 US

FEI Number: 26-3301829 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **SECRETARY** Title PRESIDENT, CEO

ESTERMAN, MICHELLE D. Name SETHNA, SHAUN Name

Address 4828 LOPP CENTRAL DRIVE Address 1000 ABERNATHY ROAD

SUITE 200

City-State-Zip: HOUSTON TX 77027 ATLANTA GA 30328 City-State-Zip:

Title **TREASURER**

Title **DIRECTOR** HARCOURT, TIMOTHY G.N. Name Name

WILCOX, KEVIN J. Address 1000 ABERNATHY ROAD **40 AVENUE MONTEREY**

Address SUITE 200

City-State-Zip: LUXEMBOURG CITY L-2163 City-State-Zip: ATLANTA GA 30328

Title DIRECTOR Title DIRECTOR

Name MASTIONI, MARCELLO KEARNS, MARK F.A. Name Address **40 AVENUE MONTEREY** Address **40 AVENUE MONTEREY** City-State-Zip: LUXEMBOURG CITY L-2163

City-State-Zip: LUXEMBOURG CITY L-2163

ASSISTANT VICE PRESIDENT AND Title Title VICE PRESIDENT AND BROKER **BROKER**

Name SIBIGA, STEPHEN P. Name TORRES, DAVID A.

Address 12001 SCIENCE DRIVE

ONE PIERREPONT PLAZA Address SUITE 100

300 CADMAN PLAZA WEST SUITE ORLANDO FL 32826

120002

BROOKLYN NY 11201 City-State-Zip:

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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: TERESA L. DENONCOURT

AUTHORIZED PERSON

02/22/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title AUTHORIZED PERSON
Name DENONCOURT, TERESA L.

Address 1000 ABERNATHY ROAD

SUITE 200

City-State-Zip: ATLANTA GA 30328