

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006151

Entity Name: HOMEWARD RESIDENTIAL, INC.**Current Principal Place of Business:**1525 S. BELT LINE RD.
COPPELL, TX 75019**Current Mailing Address:**1525 S. BELT LINE RD.
COPPELL, TX 75019 US**FEI Number:** 42-1739728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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, CEO, DIRECTOR
Name APPLEGATE, DAVID M.
Address 1525 S. BELT LINE RD.
City-State-Zip: COPPELL TX 75019

Title ASST. SECRETARY
Name DAY, KIMBERLY
Address 1525 S. BELT LINE RD.
City-State-Zip: COPPELL TX 75019

Title EVP, DIRECTOR
Name ZEIDMAN, MARK S.
Address 1525 S. BELT LINE RD.
City-State-Zip: COPPELL TX 75019

Title CFO
Name BRITTI, JOHN V.
Address 2002 SUMMIT BOULEVARD, 6TH
 FLOOR
City-State-Zip: ATLANTA GA 30319

Title DIRECTOR
Name LOVE, ROBERT L. JR.
Address 1525 S. BELT LINE RD.
City-State-Zip: COPPELL TX 75019

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: DAVID M. APPLEGATE**PRESIDENT AND CEO****04/26/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date