2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000005665

1. Entity Name
HOME DYNAMICS SIERRA RANCH, LLC

FILED
Mar 15, 2004 08:00 AM
Secretary of State

Principal Place of Business
4788 W. COMMERCIAL BLVD.
TAMARAC, FL 33319

Mailing Address
4788 W. COMMERCIAL BLVD.
TAMARAC, FL 33319

01062004 No Chg-LLC CR2E083 (10/03)

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4. FEI Number
65-1008704

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHACK, EDWARD J
7954 PINES BLVD
PEMBROKE PINES, FL 33024

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCHACK, DAVID
STREET ADDRESS	4788 W. COMMERCIAL BLVD.
CITY-ST-ZIP	TAMARAC, FL 33319
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/15/04-80102-002 50.00

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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ 3/5/04 954-484-4890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #