

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057067

Entity Name: YES-HOMES, LLC

FILED  
Jan 06, 2009  
Secretary of State

**Current Principal Place of Business:**

330 BEACH DRIVE, NE  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

4908 62ND AVE SOUTH  
ST. PETERSBURG, FL 33715

**New Mailing Address:**

FEI Number: 20-4255132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAGUIRE, PATRICK T  
1253 PARK STREET  
CLEARWATER, FL 33756 US

**Name and Address of New Registered Agent:**

O'CONNOR, PATRICK M  
1250 S, BELCHER ROAD  
SUITE 160  
LARGO, FL 33771 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: PATRICK O'CONNOR

01/06/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ELLIS, MARIAN YON  
Address: 128 BAY POINT DRIVE  
City-St-Zip: ST. PETERSBURG, FL 33704

Title: MGRM ( ) Delete  
Name: SANDERFORD, RHONDA  
Address: 4908 62ND AVE SOUTH  
City-St-Zip: ST PETERSBURG, FL 33715

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MAGUIRE, MARIAN YON  
Address: 128 BAY POINT DRIVE  
City-St-Zip: ST. PETERSBURG, FL 33704

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RHONDA SANDERFORD

MGRM

01/06/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date