

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000099613

FILED
May 06, 2009
Secretary of State

Entity Name: PROBUILDER SOLUTIONS, LLC

Current Principal Place of Business:

4185 WEST MARY BLVD., SUITE 216
LAKE MARY, FL 32746

New Principal Place of Business:

394 WINSFORD CT
LAKE MARY, FL 32746

Current Mailing Address:

4185 WEST MARY BLVD., SUITE 216
LAKE MARY, FL 32746

New Mailing Address:

394 WINSFORD CT
LAKE MARY, FL 32746

FEI Number: 51-0654782 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PALOMBI, MICHAEL L
Address: 4185 WEST MARY BLVD., SUITE 216
City-St-Zip: LAKE MARY, FL 32746

Title: S () Delete
Name: PALOMBI, MICHAEL L
Address: 4185 WEST MARY BLVD., SUITE 216
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PALOMBI, MICHAEL L
Address: 394 WINSFORD CT
City-St-Zip: LAKE MARY, FL 32746

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: MICHAEL L PALOMBI

MGR

05/06/2009

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