

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000005317	
1. Entity Name HOME SAFE, LLC	

Principal Place of Business 5914 JET PORT INDUSTRIAL BLVD TAMPA, FL 33634 US	Mailing Address 5914 JET PORT INDUSTRIAL BLVD TAMPA, FL 33634 US
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DO NOT WRITE IN THIS SPACE



02232006 No Chg-LLC

CR2E063 (11/05)

4. FEI Number 59-3639733	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent KOCH, STEPHEN A ESQ 201 N FRANKLIN ST STE 3010 TAMPA, FL 33602
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IN THIS SPACE

7. 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's signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GULLO, GLENN J 10908 JUNIPERUS PL. TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FARLEY, FRANCIS E 12011 WANDSWORTH DR. TAMPA, FL 33626
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1100000447857
03/08/06-00074-007 \$0.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 606, Florida Statutes.

SIGNATURE: Glenn J Gallo, Pres. **02/23/2006** **813 890-8809**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #