

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018169

FILED
Jan 12, 2005
Secretary of State

Entity Name: ABSOLUTE QUALITY HOME IMPROVEMENTS, LLC

Current Principal Place of Business:

58 HORTON CIRCLE
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

58 HORTON CIRCLE
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1149595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDWARD LYNCH, JAMES
58 HORTON CIRCLE
SARASOTA, FL 34232 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/MEMBERS:

Title: MGR () Delete
Name: LYNCH, JAMES E
Address: 58 HORTON CIRCLE
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: LYNCH, SUSAN
Address: 58 HORTON CIRCLE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: LYNCH, SUSAN
Address: 58 HORTON CIRCLE
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES EDWARD LYNCH

MGR

01/12/2005

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