

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012427

FILED
Apr 27, 2005
Secretary of State

Entity Name: SOUTHERN HOME LIGHTING, LLC

Current Principal Place of Business:

4095 STATE ROAD 7
STE P
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

4095 STATE ROAS 7, STE. Q1
LAKE WORTH, FL 33467

New Mailing Address:

4095 STATE ROAD 7, SUITE P
LAKE WORTH, FL 33467

FEI Number: 02-0602481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERSON, GARY N
1645 PALM BEACH LAKES BLVD., STE. 1200
WEST PALM BEACH, FL 33401 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: MGRM () Delete
Name: SAVARESE, RENEE
Address: 2404 LANDINGS BLVD
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR () Delete
Name: SAVARESE, WILLIAM
Address: 2404 LANDINGS BLVD
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR () Delete
Name: POPHAM, GEORGINA
Address: 1645 PALM BEACH LAKES BLVD #1200
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: SAVARESE, RENEE
Address: 2404 LANDINGS BLVD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

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

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

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

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

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: RENEE SAVARESE

OWNE

04/27/2005

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