

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90043 042 \*\*\*\*50.00

**DOCUMENT # L02000029724**

1. Entity Name

LUV-IT HOMES, LLC.



Principal Place of Business

1230 W INDIANTOWN RD  
STE 101  
JUPITER FL 33458

Mailing Address

1230 W INDIANTOWN RD  
STE 101  
JUPITER FL 33458



2. Principal Place of Business

3. Mailing Address

**Luv It Homes**  
**1935 Commerce Ln Ste 4**  
**Jupiter, FL 33458**

**Luv It Homes**  
**1935 Commerce Ln Ste 4**  
**Jupiter, FL 33458**

1st MOORE CR2E083 (10/05)

4. FEI Number

61-1441633

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ARENA, FRANK  
1230 W INDIANTOWN RD  
SUITE 101  
JUPITER FL 33458

7. Name and Address of New Registered Agent

Name **Frank ARENA**  
Street Address (P.O. Box Number is Not Acceptable)  
**1935 Commerce Ln. Suite 4**  
City **Jupiter** FL Zip Code **33458**

8. 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 signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2006**

9. MANAGING MEMBERS / MANAGERS

TITLE **MGR** ☒ Delete  
NAME **ARENA, FRANK**  
STREET ADDRESS **1230 W INDIANTOWN RD, STE 101**  
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **1935 Commerce Lane #4**  
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 608, Florida Statutes.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**4-20-06 561 746 3191**