

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029724

Entity Name: LUV-IT HOMES, LLC.

FILED  
Feb 14, 2008  
Secretary of State

## Current Principal Place of Business:

6526 SOUTH KANNER HIGHWAY  
SUITE 323  
STUART, FL 34997

## New Principal Place of Business:

## Current Mailing Address:

6526 SOUTH KANNER HIGHWAY  
SUITE 323  
STUART, FL 34997

## New Mailing Address:

FEI Number: 61-1441633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARENA, FRANK  
6526 SOUTH KANNER HIGHWAY  
#323  
STUART, FL 33458 US

## Name and Address of New Registered Agent:

ARENA, FRANK  
6526 SOUTH KANNER HIGHWAY  
#323  
STUART, FL 34997 US

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: FRANK ARENA

02/14/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ARENA, FRANK  
Address: 6526 SOUTH KANNER HIGHWAY  
City-St-Zip: STUART, FL 34997

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ARENA, FRANK  
Address: 6526 SOUTH KANNER HIGHWAY #323  
City-St-Zip: STUART, FL 34997

Title: MGR ( ) Change (X) Addition  
Name: MARINA, ANGELONE  
Address: 6526 SOUTH KANNER HIGHWAY #323  
City-St-Zip: STUART, FL 34997

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: FRANK ARENA

MGRM

02/14/2008

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