

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030921

FILED
Mar 12, 2007
Secretary of State

Entity Name: HOME SERVICES MARKETING AND MANAGEMENT, L.L.C.

Current Principal Place of Business:

9100 HAMMAN
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15606
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 51-0436034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, ROBERT O
226 EAST GOVERNMENT STREET
PENSACOLA, FL 32501 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/MANAGERS:

Title: MGR () Delete
Name: KILLINGSWORTH, CLINTON W
Address: 933 BUCYRUS LN
City-St-Zip: CANTONMENT, FL 32533

Title: MGR () Delete
Name: KILLINGSWORTH, CLIFFORD F
Address: 205 NEWBERRY STREET
City-St-Zip: CANTONMENT, FL 32533

ADDITIONS/CHANGES:

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 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: CLINT KILLINGSWORTH

MGR

03/12/2007

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