2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 27, 2005
Secretary of State

DOCUMENT# L02000031188

Entity Name: JENNINGS' MOBILE HOME SETUP, L.L.C.

Current Principal Place of Business:

5605 COMMERCIAL BOULEVARD
UNIT #1
WINTER HAVEN, FL 33880

New Principal Place of Business:

229 ARIANA AVENUE
AUBURNDALE, FL 33823

Current Mailing Address:

PO BOX 1428
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-3055083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

JENNINGS, THOMAS G
683 OLD BERKLEY RD
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

JENNINGS, THOMAS G
5534 OLD BERKLEY RD
AUBURNDALE, FL 33823 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: THOMAS G. JENNINGS 07/27/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: JENNINGS, THOMAS G
Address: 5605 COMMERCIAL BOULEVARD
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: JENNINGS, THOMAS G
Address: 229 ARIANA AVENUE
City-St-Zip: AUBURNDALE, FL 33823

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: THOMAS G. JENNINGS MGR 07/27/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date