

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000008490

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** US HOME-NETWORK SOLUTIONS LLC

**Current Principal Place of Business:**

17080 SAFETY ST.  
UNIT # 107  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

**Current Mailing Address:**

17350 CARDEN COURT  
FORT MYERS, FL 33908 US

**New Mailing Address:**

**FEI Number:** 57-1155679      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPINELLI, DANIEL E  
17350 CARDEN COURT  
FORT MYERS, FL 339086020 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:** MGRM  
**Name:** SPINELLI, DANIEL E  
**Address:** 17350 CARDEN COURT  
**City-St-Zip:** FORT MYERS, FL 33908 US

**Title:** MGRM  
**Name:** ROLDAN, MONICA S  
**Address:** 17350 CARDEN COURT  
**City-St-Zip:** FORT MYERS, FL 33908 US

I hereby 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: MONICA ROLDAN

MGRM

04/28/2010

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