## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Mar 04, 2005 08:00 AM Secretary of State DOCUMENT # L03000040884 1. Entity Name HOME-E INVESTMENTS, LLC Principal Place of Business Mailing Address 18506 LONGLAKE DRIVE 18506 LONGLAKE DRIVE HUDSON, FL 34667 UŠ HUDSON, FL 34667 01122005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0440669 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GERBER, BERNADETTE 18506 LONGLAKE DRIVE HUDSON, FL 34667 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE GERBER, BERNADETTE NAME STREET ADDRESS 18506 LONGLAKE DRIVE 000000251519 03/04/05-80054-017 50.00 HUDSON, FL 34667 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify 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 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:

FILED