

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047241

Entity Name: ALL POINT HOMES, LLC

FILED  
Apr 30, 2007  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 3493  
NORTH FORT MYERS, FL 33918

**New Principal Place of Business:**

340 BAYSHORE DR.  
WILMINGTON, NC 28411

**Current Mailing Address:**

P.O. BOX 3493  
NORTH FORT MYERS, FL 33918

**New Mailing Address:**

340 BAYSHORE DR.  
WILMINGTON, NC 28411

FEI Number: 74-3112380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EDY, WILLIAM T ATTY.  
201 NICHOLAS PARKWAY WEST  
CAPE CORAL, FL 339912590 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 ( ) Delete  
Name: POYNTER, KAREN S  
Address: PO BOX 3493  
City-St-Zip: NORTH FORT MYERS, FL 33918

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: POYNTER, KAREN S  
Address: 340 BAYSHORE DR  
City-St-Zip: WILMINGTON, NC 28411

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: KAREN S POYNTER

PD

04/30/2007

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