

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049404

FILED  
Apr 05, 2006  
Secretary of State

**Entity Name:** ALL AROUND HOME IMPROVEMENTS, LLC

**Current Principal Place of Business:**

7323 HUMBOLDT AVE  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

7323 HUMBOLDT AVE  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

FEI Number: 20-0452533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

USACCOUNTING OFFICE, INC.  
4815 E BUSCH BLVD  
SUITE 113  
TAMPA, FL 33617 US

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

TOTAL BOOKKEEPING SERVICE  
2155 GRAND BLVD.  
HOLIDAY, FL 34690 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: BETH JEANNOTTE

04/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CREE, MARTIN R  
Address: 7323 HUMBOLDT AVE  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: MGRM ( ) Delete  
Name: MCQUEEN, GARY K  
Address: 7323 HUMBOLDT AVE  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

**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: MARTIN R. CREE

MGRM

04/05/2006

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