

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000050628

Entity Name: SPARKLES HOMES, LLC

FILED
Feb 18, 2005
Secretary of State

Current Principal Place of Business:

1801 N.E. VAN LOON TERRACE
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1801 N.E. VAN LOON TERRACE
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 11-5506673

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, LEIGH M
1505 SE 40TH STREET
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

FISHER, LEIGH M
4403 SE 16TH PLACE, UNIT 2
CAPE CORAL, FL 33904 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:

02/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TURNER, ALEXANDER
Address: 1801 NE VAN LOON TERR.
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM () Delete
Name: TURNER, NANCY
Address: 1801 NE VAN LOON TERR.
City-St-Zip: CAPE CORAL, FL 33909

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 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: NANCY L. TURNER

MGRM

02/18/2005

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