

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000056584

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** BOB ROSENDE MINOR HOME REPAIRS L.L.C.

**Current Principal Place of Business:**

438 5TH STREET NORTH  
WEST LARGO, FL 33770

**New Principal Place of Business:**

438 5TH STREET NW  
LARGO, FL 33770

**Current Mailing Address:**

438 5TH STREET NORTH  
WEST LARGO, FL 33770

**New Mailing Address:**

438 5TH STREET NW  
LARGO, FL 33770

**FEI Number:** 51-0492128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENDE, ROBERT  
438 5TH STREET NORTH  
WEST LARGO, FL 33770 US

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

ROSENDE, ROBERT  
438 5TH STREET NW  
LARGO, FL 33770 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:

03/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROSENDE, BOB  
Address: 438 5TH STREET NW  
City-St-Zip: LARGO, FL 33770

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: ROBERT ROSENDE

PRES

03/21/2011

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