

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057110

FILED
Jan 03, 2007
Secretary of State

Entity Name: A + HOME IMPROVEMENTS L. L. C.

Current Principal Place of Business:

5125 TEAKWOOD DRIVE
PENSACOLA, FL 32506

New Principal Place of Business:

7502 WEST JACKSON STREET
PENSACOLA, FL 32506

Current Mailing Address:

PMB 186 #9 4600 MOBILE HWY
PENSACOLA, FL 32506

New Mailing Address:

7502 WEST JACKSON STREET
PENSACOLA, FL 32506

FEI Number: 57-1174640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MYERS, TERRY J
5125 TEAKWOOD DR
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

TOBUREN, JEFFREY D
7502 WEST JACKSON STREET
PENSACOLA, FL 32506 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: JEFFREY D. TOBUREN

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TOBUREN, JEFFERY D
Address: 7516 W JACKSON STREET
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM (X) Delete
Name: MYERS, TERRY J
Address: 5125 TEAKWOOD DRIVE
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TOBUREN, JOY
Address: 7502 WEST JACKSON STREET
City-St-Zip: PENSACOLA, FL 32506

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: JEFFREY D. TOBUREN

MGRM

01/03/2007

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