2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP 14 AM 10:01

DOCUMENT # L04000007908

1. Entity Name
PERFECT HOME REALTY, LLC

Principal Place of Business
11595 KELLY ROAD
FORT MYERS, FL 33908 US

Mailing Address
P.O. BOX 07415
FORT MYERS, FL 33919 US

09072006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 20-0721362 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
MONTGOMERY, ROBERT L
~~4200 STEAMBOAT BEND~~
~~SUITE 502~~
~~FORT MYERS, FL 33919~~
some change of address

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable) 12060 SABAL DUNES LANE
City FT. MYERS FL Zip Code 33913

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Dolores Montgomery 9-08-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 15, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE	MGRM	☐ Delete	MANAGER	☑ Change ☐ Addition
NAME	MONTGOMERY, ROBERT L		DOLORES MONTGOMERY	
STREET ADDRESS	4200 STEAMBOAT BEND	ADDRESS CHANGE	697 CIELO VISTA DRIVE	
CITY-ST-ZIP	FORT MYERS, FL 33919		GREENWOOD, IN 46143	
TITLE	MGRM	☑ Delete	MEMBER	☑ Change ☐ Addition
NAME	ZUKERMAN, ALLAN B		ROBERT L. MONTGOMERY	
STREET ADDRESS	2216 EMILY DRIVE		12060 SABAL DUNES LANE	
CITY-ST-ZIP	INDIANAPOLIS, IN 46260		FT. MYERS, FL 33913	
TITLE	MGRM	☑ Delete		☐ Change ☐ Addition
NAME	BREEDLOVE, REX D			
STREET ADDRESS	4160 STEAMBOAT BEND, EAST # 104			
CITY-ST-ZIP	FORT MYERS, FL 33919			
TITLE	MGRM	☐ Delete		☐ Change ☐ Addition
NAME	MONTGOMERY, DOLORES J			
STREET ADDRESS	697 CIELO VISTA DRIVE			
CITY-ST-ZIP	GREENWOOD, IN 46143			
TITLE		☐ Delete		☐ Change ☐ Addition
NAME			200000002452	
STREET ADDRESS			09/20/06--01052--003 **50.00	
CITY-ST-ZIP				
TITLE		☐ Delete		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY-ST-ZIP				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

317-923-1066

SIGNATURE: Dolores Montgomery 9-08-06 317-403-9522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

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