2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000021908

1. Entity Name
HOMETOWNSHOPPING.COM LLC

Principal Place of Business	Mailing Address
1115 SOUTHAMPTON DR.	1115 SOUTHAMPTON DR.
SUITE A	SUITE A
PORT ORANGE, FL 32129 US	PORT ORANGE, FL 32129 US

DO NOT WRITE IN THIS SPACE

04192006No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
26-4848162	Not Applicable

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

6. Name and Address of Current Registered Agent

BECKER, JAN M
1115 SOUTHAMPTON DR.
UNIT A
PORT ORANGE, FL 32129

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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
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 May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	BECKER, JAN M
STREET ADDRESS	1115 SOUTHAMPTON DR. UNIT A
CITY-ST-ZIP	PORT ORANGE, FL 32129
TITLE	MGRM
NAME	BECKER, JAMES H
STREET ADDRESS	1115 SOUTHAMPTON DR. SUITE A
CITY-ST-ZIP	PORT ORANGE, FL 32129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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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.

SIGNATURE: _Jan M. Becker_   4/19/06   386-795-1912
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #