


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # L04000026190
 1. Entity Name
 HOME BUYERS GIFTING, L.L.C.



Principal Place of Business 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695	Mailing Address 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695
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DO NOT WRITE IN THIS SPACE



02282008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 76-0755680	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
 LYONS, GARY W ESQ
 311 SOUTH MISSOURI AVENUE
 CLEARWATER, FL 33756

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

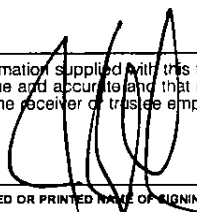
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P JOKEL, JAMES 23 FERNBROOK DR SAFETY HARBOR, FL 34695
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 03/18/08-80047-008 138.75

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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:  **Jim Jokel** **2/28/08** **727 799-4680**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #