2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# L04000030983

Entity Name: AMERICAN CRAFTSMAN HOME IMPROVEMENTS LC

Current Principal Place of Business:

9255 DAYFLOWER DRIVE
TAMPA, FL 33647

New Principal Place of Business:

9009 SHENANDOAH RUN
WESLEY CHAPEL, FL 33544

Current Mailing Address:

9255 DAYFLOWER DRIVE
TAMPA, FL 33647

New Mailing Address:

9009 SHENANDOAH RUN
WESLEY CHAPEL, FL 33544

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROCHE, WALTER F JR
9255 DAYFLOWER DRIVE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

ROCHE, WALTER F JR
9009 SHENANDOAH RUN
WESLEY CHAPEL, FL 33544 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: _____ 04/29/2005
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: ROCHE, WALTER F JR
Address: 9255 DAYFLOWER DRIVE
City-St-Zip: TAMPA, FL 33647

Title: MGR (X) Delete
Name: DIORIO, SCOTT D
Address: 4203 BEACH PARK DR
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ROCHE, WALTER F JR
Address: 9009 SHENANDOAH RUN
City-St-Zip: WESLEY CHAPEL, FL 33544

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 Section 119.07(3)(i), 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: WALTER F. ROCHE' JR MGR 04/29/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date