## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031287

Entity Name: HOME FINANCIAL ENTERPRISES, LLC

FILED Jan 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12882 SILVER SPRINGS DR S JACKSONVILLE, FL 32246 US

Current Mailing Address: New Mailing Address:

12882 SILVER SPRINGS DR S JACKSONVILLE, FL 32246 US

FEI Number: 20-1034378 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REICHENBACH, KARON L
12882 SILVER SPRINGS DR S
JACKSONVILLE, FL 32246 US
GIFFORD, KARON L
12882 SILVER SPRINGS DR S
JACKSONVILLE, FL 32246 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: KARON L REICHENBACH GIFFORD 01/17/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: REICHENBACH, KARON L Name: GIFFORD, KARON L

Address: 12883 SILVER SPRINGS DR S
City-St-Zip: JACKSONVILLE, FL 32246 US
City-St-Zip: JACKSONVILLE, FL 32246 US
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GIFFORD, JAMES N
 Name:

 Address:
 12882 SILVER SPRINGS DR S
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32246 US
 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: KARON L GIFFORD PRES 01/17/2005