

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041245

Entity Name: HOMECRAFT, LLC

FILED
Feb 04, 2005
Secretary of State

Current Principal Place of Business:

2335 EAST ATLANTIC BLVD.
SUITE # 406
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2335 EAST ATLANTIC BLVD.
SUITE # 406
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 32-0118191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTMAN, BARRY S
2335 EAST ATLANTIC BLVD.
SUITE # 406
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ALTMAN, BARRY S
Address: 2335 EAST ATLANTIC BLVD. SUITE # 406
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM (X) Delete
Name: ALTMAN, HAROLD
Address: 2335 EAST ATLANTIC BLVD. SUITE # 406
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM (X) Delete
Name: NITE, HENRY J
Address: 5049 ENCINITAS DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM (X) Delete
Name: GELBERG, DIANE S
Address: 5049 ENCINITAS DRIVE
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BARRY S. ALTMAN

MGRM

02/04/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date