2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049817

City-St-Zip:

Entity Name: HOME SHOPPES OF TAMPA BAY, LLC

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 501 N. REO STREET TAMPA, FL 33609 **Current Mailing Address: New Mailing Address:** 501 N. REO STREET TAMPA, FL 33609 FEI Number: 20-1319745 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: BONANNO, ROBERT H 16017 N. FLORIDA AVENUE SUITE # 101 LUTZ, FL 33549 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: (X) Change () Addition () Delete BONANNO, SONJA SUNCOAST ROOFERS SUP, PLY, INC. Name: Name: Address: 15009 LAKE EMERALD BLVD. Address: 501 N. REO STREET City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33609 Title: Title: () Change (X) Addition () Delete Name: Name: LIGHTNING CITY GYMNA, STICS Address: Address: 14214 N. NEBRASKA AVENUE City-St-Zip: City-St-Zip: TAMPA, FL 33609 Title: () Delete Title: MGRM () Change (X) Addition WHEELOCK FAMILY LIMI, TED PARTNERSHI P Name: Name: Address: Address: P.O. BOX 1925 City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34688 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: PAUL MITCHELL, THE S, CHOOL 1271 SEMORAN BLVD. Address: Address: City-St-Zip: City-St-Zip: CASSELBERRY, FL 32707 Title: () Delete Title: MGRM () Change (X) Addition M.V.B. GROUP, INC., Name: Name: 2600 30TH AVENUE NORTH Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

City-St-Zip:

ST. PETERSBURG, FL 33713

SIGNATURE: SONJA BONANNO MGR 01/05/2007