2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 18, 2007 08:00 AM DOCUMENT # L04000051788 **Secretary of State** 1. Entity Name HOMEWORKS LLC Principal Place of Business Mailing Address 110 SOUTH MARE AVE 110 SOUTH MARE AVE HOWEY IN THE HILLS, FL 34737 HOWEY IN THE HILLS, FL 34737 07112007No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent MUTTER, COURTNEY S DO NOT WRITE 110 S MARE AVE HOWEY-IN-THE-HILLS, FL 34737 IN THIS SPACE 1. 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. U00000769409 07/18/07-80006-008 5.00 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent aignature required when reinstating U00000769409 Filing Fee is \$50.00 Due by September 14, 2007 07/18/07-80006-007 50.00 9. MANAGING MEMBERS/MANAGERS MGR TITLE MUTTER, COURTNEY S MARKE STREET ADDRESS 110 S MARE AVE CITY-ST-ZIP HOWEY-IN-THE-HILLS, FL 34737 TIFLE NAME STREET ADORESS CITY-ST-7/P mu NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILLE HASAE STREET ADDRESS City-ST-ZIP

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:

HILE

STREET ADDRESS CITY-ST-ZIP me NAME STREET ADDRESS CITY-ST-ZP

SIGNATURE AND TYPED OR PRINTED NAME OF

MER. OR ASSISTANCESCED REPRESENTATIVE

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