

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058357

Entity Name: ARIPEKA HOMES, LLC

FILED
Feb 24, 2006
Secretary of State

Current Principal Place of Business:

11051 CHALLENGER AVE.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

4934 W MELROSE AVENUE N
TAMPA, FL 33629

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARLOWE & MCNABB P.A.
324 S. HYDE PARK AVE.
TAMPA, FL 33606 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/MANAGERS:

Title: MGRM () Delete
Name: STANSELL, HAROLD
Address: 4934 W MELROSE AVE. N.
City-St-Zip: TAMPA, FL 33619

Title: MGRM () Delete
Name: LEVERETTE, BRIAN F
Address: 3060 SUNSET VISTA DRIVE
City-St-Zip: SPRING HILL, FL 34607

Title: MGRM () Delete
Name: FUGATE, MICHAEL D
Address: 11051 CHALLENGER AVE.
City-St-Zip: ODESSA, FL 33556

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:

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.

SIGNATURE: HAROLD E STANSELL

MGRM

02/24/2006

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