2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# L04000058357

Entity Name: ARIPEKA HOMES, LLC

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 ( )**

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 STANSELL MGRM 04/09/2007

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