

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000069801

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** THOMAS F. ACCARIO QUALITY HOME REPAIRS, LLC.

**Current Principal Place of Business:**

686 CARNIVAL TERRACE  
SEBASTIAN, FL 32958

**New Principal Place of Business:**

9365 SEAGRAPE DR  
VERO BEACH, FL 32963

**Current Mailing Address:**

686 CARNIVAL TERRACE  
SEBASTIAN, FL 32958

**New Mailing Address:**

9365 SEAGRAPE DR  
VERO BEACH, FL 32963

**FEI Number:** 56-2489141

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACCARIO, THOMAS  
686 CARNIVAL TERRACE  
SEBASTIAN, FL 32958 US

**Name and Address of New Registered Agent:**

ACCARIO, THOMAS  
9365 SEAGRAPE DR.  
VERO BEACH, FL 32963 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:** THOMAS F. ACCARIO

04/29/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRP  
**Name:** ACCARIO, THOMAS  
**Address:** 9365 SEAGRAPE DR.  
**City-St-Zip:** VERO BEACH, FL 32963

I hereby 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:** THOMAS F. ACCARIO

OWNE

04/29/2012

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