


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-08-2007 90191 019 ****50.00

DOCUMENT # L04000071636 1. Entity Name HOME BUYERS SOLUTIONS, LLC	
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Principal Place of Business 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695	Mailing Address 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695
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DO NOT WRITE IN THIS SPACE



02142007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 14-1915945	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent LYONS, GARY W ESQ 311 SOUTH MISSOURI AVENUE CLEARWATER, FL 33756

**DO NOT WRITE
IN THIS SPACE**

8. 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.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reappointing)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOKEL, JAMES M 23 FERNBROOKE DRIVE SAFETY HARBOR, FL 34695
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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: 	Date: 3/20/2007	Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		