2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# L04000082459

Entity Name: HOME TECH ENTERPRISES LLC

Current Principal Place of Business:

1108 NW 42ND PL
CAPE CORAL, FL 33993

New Principal Place of Business:

Current Mailing Address:

1108 NW 42ND PL
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: 14-1924755 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
BOX 1393310
DIEGA, FL 32725 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: ALLAN, DONNA J 03/10/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ALLAN, DONNA J
Address: 1108 NW 42ND PL
City-St-Zip: CAPE CORAL, FL 33993

Title: MGRM ( ) Delete
Name: ALLAN, GHAZI
Address: 1108 NW 42ND PL
City-St-Zip: CAPE CORAL, FL 33993

Title: MGRM ( ) Delete
Name: BARCLAY, JOSEPH JR
Address: 1108 NW 42ND PL
City-St-Zip: CAPE CORAL, FL 33993

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 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: ALLAN, DONNA J MGRM 03/10/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date