

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083455

FILED  
Apr 30, 2005  
Secretary of State

**Entity Name:** BRETT'S HOME REPAIR AND REMODELING L.L.C

**Current Principal Place of Business:**

1571 SOUTH ATLANTIC AVE.  
UNIT 101  
NEW SYMRNA BEACH, FL 32168

**New Principal Place of Business:**

415 W OCEAN  
EDGEWATER, FL 32132

**Current Mailing Address:**

P.O BOX 121  
OAK HILL, FL 32759

**New Mailing Address:**

P.O BOX 1281  
EDGEWATER, FL 32132

**FEI Number:** 83-0411192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, BRETT A  
1571 SOUTH ATLANTIC AVE  
UNIT 101  
NEW SMYRNA BEACH, FL 32168 US

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

PHILLIPS, BRETT A  
415 W OCEAN  
EDGEWATER, FL 32132 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: BRETT A PHILLIPS

04/30/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: M ( ) Change (X) Addition  
Name: PHILLIPS, BRETT A  
Address: 415 W OCEAN  
City-St-Zip: EDGEWATER, FL 32132

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRETT A PHILLIPS

M

04/30/2005

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