

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086413

Entity Name: HARRIS HOMES LLC

FILED
Mar 27, 2006
Secretary of State

Current Principal Place of Business:

6401 S. WESTSHORE #1609S
TAMPA, FL 33616

New Principal Place of Business:

6401 S. WESTSHORE #1609S
TAMPA, FL 33616 US

Current Mailing Address:

6401 S. WESTSHORE #1609S
TAMPA, FL 33616

New Mailing Address:

12921 BIG SUR DR.
TAMPA, FL 33625 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: MGR () Delete
Name: HARRIS, ISHAM
Address: 6401 S. WESTSHORE #1609S
City-St-Zip: TAMPA, FL 33616

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARRIS, ISHAM
Address: 12921 BIG SUR
City-St-Zip: TAMPA, FL 33625

Title: MGR () Change (X) Addition
Name: HARRIS, ISHAM
Address: 12921 BIG SUR
City-St-Zip: TAMPA, FL 33625

Title: MGR () Change (X) Addition
Name: HARRIS, JOSEPH
Address: PSC 817 BOX 50
City-St-Zip: FPO, DC 09622

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: ISHAM A. HARRIS

MGR

03/27/2006

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