

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005897

Entity Name: HOME PROS GUIDE, LLC

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

5000 S HARBOR ISLES DR
2401
FT-LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

5000 S HARBOR ISLES
2401
FT-LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 20-2189635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, NEOMI
5000 S HARBOR ISLES DR
#2401
FT-LAUDERDALE, FL 33312 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: POWELL, NEOMI
Address: 5000 S HARBOR ISLES DR, #2401
City-St-Zip: FT-LAUDERDALE, FL 33312

Title: MGR () Delete
Name: ORYON, YASMIN S
Address: 5000 S HARBOR ISLES DR, #2401
City-St-Zip: FT-LAUDERDALE, FL 33312

ADDITIONS/CHANGES:

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: NEOMI POWELL

C.O

04/25/2007

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