

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014367

FILED  
Mar 20, 2007  
Secretary of State

**Entity Name:** YOUR HOME OF CHARLOTTE, LLC

**Current Principal Place of Business:**

623 W. PALM VALLEY DRIVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

4904 LORRI CIR  
NORTH PORT, FL 34286

**Current Mailing Address:**

623 W. PALM VALLEY DRIVE  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 20-2313183      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SKOKOS, PETER Z  
1819 MAIN STREET STE 610  
SARASOTA, FL 34236 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: CUPP, CHRISTINE ANN  
Address: 623 W. PALM VALLEY DRIVE  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHRISTINE CUPP

MGR

03/20/2007

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