

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014367

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: YOUR HOME OF CHARLOTTE, LLC

**Current Principal Place of Business:**

4904 LORRI CIR  
NORTH PORT, FL 34286

**New Principal Place of Business:**

8128 WILTSHIRE DRIVE  
PORT CHARLOTTE, FL 33981

**Current Mailing Address:**

4904 LORRI CIR  
NORTH PORT, FL 34286

**New Mailing Address:**

8128 WILTSHIRE DRIVE  
PORT CHARLOTTE, FL 33981

FEI Number: 20-2313183

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CUPP, CHRISTIN  
4904 LORRI CIR  
NORTH PORT, FL 34286 US

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

CUPP, CHRISTIN  
8128 WILTSHIRE DRIVE  
PORT CHARLOTTE, FL 33981 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: CHRISTIN CUPP

04/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CUPP, CHRISTINE ANN  
Address: 4904 LORRI CIR.  
City-St-Zip: NORTH POINT, FL 32486

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CUPP, CHRISTINE ANN  
Address: 8128 WILTSHIRE DRIVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

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: CHRISTINE ANN CUPP

MGR

04/15/2009

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