

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015488

Entity Name: HOME CONNECTION L.L.C.

FILED  
Apr 18, 2008  
Secretary of State

## Current Principal Place of Business:

2733 EMPIRE CHURCH RD  
GROVELAND, FL 34736

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 477  
GROVELAND, FL 347360477

## New Mailing Address:

FEI Number: 20-2579362

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, RAY  
2733 EMPIRE CHURCH RD  
GROVELAND, FL 34736 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: JONES, RAY  
Address: 2733 EMPIRE CHURCH RD  
City-St-Zip: GROVELAND, FL 34736

Title: MGRM ( ) Delete  
Name: JONES, CAROL  
Address: 2733 EMPIRE CHURCH RD  
City-St-Zip: GROVELAND, FL 34736

Title: MGRM ( ) Delete  
Name: ASH, CHRISTOPHER A  
Address: P.O. BOX 477  
City-St-Zip: GROVELAND, FL 34736

## ADDITIONS/CHANGES:

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

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: RAY JONES

MGR

04/18/2008

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