

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015870

FILED
Jan 21, 2008
Secretary of State

Entity Name: FLORIDA HOMEOWNER SOLUTIONS LLC

Current Principal Place of Business:

4524 SADDLECREEK PLACE
ORLANDO, FL 32829

New Principal Place of Business:

2750 BOAT COVE CIRCLE
KISSIMMEE, FL 34746

Current Mailing Address:

4524 SADDLECREEK PLACE
ORLANDO, FL 32829

New Mailing Address:

2750 BOAT COVE CIRCLE
KISSIMMEE, FL 34746

FEI Number: 20-2552101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RARIDEN, WILEY A
4524 SADDLECREEK PLACE
ORLANDO, FL 32829 US

Name and Address of New Registered Agent:

RARIDEN, WILEY A
2750 BOAT COVE CIRCLE
KISSIMMEE, FL 34746 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:

01/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RARIDEN, WILEY A
Address: 4524 SADDLECREEK PLACE
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RARIDEN, WILEY A
Address: 2750 BOAT COVE CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

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: WILEY A RARIDEN

MGRM

01/21/2008

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