

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021604

**FILED**  
**Mar 31, 2006**  
**Secretary of State**

**Entity Name:** FAMILY HOME BUILDERS, LLC

**Current Principal Place of Business:**

2620 WOODLAND BLVD.  
DELAND, FL 32720 US

**New Principal Place of Business:**

5110 BLUE BERRY ACRES  
DE LEON SPRINGS, FL 32130 US

**Current Mailing Address:**

2620 WOODLAND BLVD.  
DELAND, FL 32720 US

**New Mailing Address:**

P.O. BOX 1116  
DE LEON SPRINGS, FL 32130 US

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

OUTZEN, PAULA A  
21 PROVIDENCE LANE  
PALM COAST, FL 32164 US

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

OUTZEN, PAULA A  
5110 BLUE BERRY ACRES  
DE LEON SPRINGS, FL 32130 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: PAULA OUTZEN

03/31/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: OUTZEN, PAULA A  
Address: PO BOX 5005  
City-St-Zip: DELTONA, FL 32728 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: OUTZEN, PAULA A  
Address: PO BOX 1116  
City-St-Zip: DE LEON SPRINGS, FL 32130 US

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: PAULA OUTZEN

MGR

03/31/2006

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